

7<sup>th</sup> ANNUAL  
**CONFERENCE  
ON ADOLESCENT  
HEALTH**

APRIL 20-21, 2020  
DETROIT MARRIOTT  
DETROIT, MI

ADOLESCENT  
HEALTH INITIATIVE

TRANSLATING RESEARCH INTO PRACTICE

## MONDAY, APRIL 20, 2020

7:30 AM - 8:15 AM Breakfast, Registration,  
and Welcome

8:15 AM - 8:45 AM Youth Presentation

8:45 AM - 9:45 AM Plenary Presentation

9:45 AM - 10:00 AM Break

10:00 AM - 11:00 AM Breakout Session 1

11:00 AM - 11:15 AM Break and Snack

11:15 AM - 12:15 PM Breakout 2 (repeated)

12:15 PM - 1:30 PM Lunch and Plenary

1:30 PM - 1:45 PM Break

1:45 PM - 2:45 PM Breakout Session 3

2:45 PM - 3:00 PM Break

3:00 PM - 4:00 PM Breakout 4 (repeated)

4:00 PM - 5:30 PM Poster Viewing,  
Networking Reception, and  
Youth Performance

## TUESDAY, APRIL 21, 2020

8:00 AM - 8:30 AM Breakfast and Registration

8:30 AM - 9:30 AM Keynote Presentation

9:30 AM - 9:45 AM Break

9:45 AM - 10:45 AM Breakout Session 5

10:45 AM - 11:00 AM Break and Snack

11:00 AM - 12:00 PM Breakout 6 (repeated)

12:00 PM - 1:15 PM Lunch, Awards, and Youth  
Presentation

1:15 PM - 1:30 PM Break

1:30 PM - 2:30 PM Breakout Session 7

2:30 PM - 2:45 PM Break

2:45 PM - 3:45 PM Breakout 8 (repeated)

## DETAILED AGENDA // DAY 1

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### 8:15 AM - 8:45 AM // YOUTH PRESENTATION

#### **To be announced.**

Teen HYPE

To be announced.

### 8:45 AM - 9:45 AM // PLENARY PRESENTATION

#### **Everything You Always Wanted to Know About Vaping\* (\*But Were Afraid to Ask)**

Aaron Schuh, MD, CS Mott Children's Hospital

Do you work with adolescents? Have you always wanted to be the “cool” provider who can discuss vaping like you’ve tried it yourself? This session will give you the tools to intelligently discuss vaping, understand its importance, as well as effect change from daily practice to federal advocacy.

#### **Objectives:**

1. Define vaping and demonstrate knowledge of how e-cigarettes work.
2. Explain and discuss the importance of vaping on adolescent health.
3. Learn to identify and use opportunities to effect change from office-based screening to federal advocacy.

## 10:00 AM - 11:00 AM // PRIMARY CARE ORAL PRESENTATIONS

### **Adolescent Risk Screening: An Overview of Evidence and Best Practices**

Jenni Lane, MA, Adolescent Health Initiative

During this session the presenter will provide an overview of the research around adolescent risk behaviors, review strategies for implementing risk screening in clinical settings, and provide an overview of available risk screening tools. Participants will leave with a mini-tool kit on implementing risk screening as well as a handout overviewing tools.

#### **Objectives:**

1. Describe the rationale for comprehensive adolescent risk-screening.
2. Identify opportunities to implement or improve risk screening processes in their organization.
3. Utilize tools and resources to enhance risk-screening processes for adolescents.

### **STI Treatment with Adolescents: Expedited Partner Therapy Viewpoint**

Cornelius D. Jamison, MD, MSPH, MS, Michigan Medicine Department of Family Medicine

During this session, there will be an overview of Expedited Partner Therapy (EPT) and its availability in Michigan. Using data pulled from MyVoice, an interactive SMS platform that gathers real-time opinions and experiences of youth across America, adolescent views around EPT will be examined.

#### **Objectives:**

1. Understand EPT, EPT clinical practice, and its benefits.
2. Understand EPT real world implementation.
3. Understand how adolescents view EPT.

## **Increasing Access to Clinical and Behavioral Health Care in a Rural Area**

Kristin Smith, BSN, RN, ProMedica Coldwater Regional Hospital

This presentation will offer a way to overcome barriers to clinical and emotional health care in a rural community through telemedicine. Learn about a model one rural health system implemented to care for adolescent students in their community.

### **Objectives:**

1. Identify three access to care issues in rural communities.
2. Be introduced to a Hub and Spokes clinical telemedicine model.
3. Discussion advantages of providing behavioral health care in a rural school setting.

## **10:00 AM - 11:00 AM // BREAKOUT SESSION 1**

### **Working on Positive Youth Development: Looking Beyond Prevention of the "Bad Stuff"**

Becky McFarland, MA, DuPage County Health Department

Rabia Mukhtar, MPH, DuPage County Health Department

Hear about creative ways to use prevention dollars for positive youth development activities. Young people don't want to hear about how they're "at-risk" for things, they want to know how they can help! Learn how to move away from prevention and move toward positive youth development!

### **Objectives:**

1. Name three ways they can use prevention funding to fund positive youth development activities.
2. Think about prevention funding in a broader way and not limit themselves in the types of activities they can do.
3. Brainstorm how to collaborate with other prevention efforts in their community to create positive youth development opportunities.

## **Family-Based Treatment for Adolescent Eating Disorders: Why? How? Who?**

Kate Fawcett, LMSW, Michigan Medicine Comprehensive Eating Disorders Program

Jessica Van Huysse, PhD, Michigan Medicine Comprehensive Eating Disorders Program

Terrill Bravender, MD, MPH, University of Michigan Department of Pediatrics

Family-Based Treatment (FBT) is the gold standard treatment for adolescent eating disorders, particularly anorexia nervosa. This session will review the empirical support for FBT, as well as strategies for implementing an FBT-informed approach when a specialized treatment center is not available.

### **Objectives:**

1. Describe general FBT treatment outcomes.
2. Outline the main objective of each of the three phases of FBT.
3. Identify key multidisciplinary team members and their respective roles in the treatment process.

## **Concepts in Primary Care of Adolescents and Young Adults Affected by Violent Injury: A Case-Based Approach**

Meredithe McNamara, MD, University of Illinois - Chicago

Jacqueline Korpics, MD, Cook County Health Systems

Unique concepts in the medical and psychosocial care of AYAs who have endured violent injury will be explored with case-based, small-group discussion. Addressing needs of this population in a primary care setting can facilitate recovery, prevent re-injury and foster positive social development.

### **Objectives:**

1. Identify unique healthcare needs of patients with violent injuries and establish a plan of care for
  - a. AYAs with spinal cord, bowel and solid organ injury,
  - b. nutritional optimization of wound and fracture healing,
  - c. lead screening in patients with retained missiles,
  - d. and pain management.
2. Identify unique psychosocial needs and establish a trauma-informed plan of care to provide harm reduction require specific resources and harm reduction techniques to be successful in professional, educational and social spheres, including victims' compensation, homebound schooling, trauma-focused therapy, and anonymous weapon surrender.
3. Adopt principles of cultural and trauma-informed sensitivity in the care for AYAs affected by violence, as outlined by youth experts in community violence.

## **All are Welcome Here: Removing Ableism and Heteronormativity from Sexuality Education**

Sarah Dahlston, MS, CHES, CSE, Planned Parenthood Southwest Ohio

This presentation will take a look at barriers faced by LGBTQ+ people living with disabilities and ways that reducing disparities can enhance their quality of life. We will examine ways in which sexuality education sessions can be developed and delivered with all identities in mind.

### **Objectives:**

1. List three ways in which LGBTQ+ people with disabilities are treated differently in regards to sexuality, sexual health education and sexual decision making.
2. Identify two ways sex education lessons can be modified to meet the needs of a divergent learner.
3. Explain two health disparities that LGBTQ+ people with disabilities may encounter.

## **11:15 AM - 12:15 PM // SEXUAL HEALTH ORAL PRESENTATIONS**

### **How Did You Make It Work? Seventeen Days in Baltimore City Title X Clinics and School-Based Health Centers**

Deborah Chilcoat, MEd, Healthy Teen Network

Minyan Faulkner-Watson, BS, Healthy Teen Network

Join us to learn more about Seventeen Days: the benefits and challenges of implementing in clinics; the strategies used to train health educators; the impact Seventeen Days had on participants; and ways that U Choose partners plan to sustain Seventeen Days when HHS/OAH funding ends in June 2020.

### **Objectives:**

1. List at least three benefits of implementing an evidence-based program in clinic settings and two strategies U Choose used to train health educators (in-person and online learning).
2. Summarize at least one impact Seventeen Days had on participants and identify at least three ways to sustain Seventeen Days in the clinic.
3. Write at least three persuasive statements supporting the implementation of Seventeen Days in their clinic/s.

## **HIV Testing to Gay and Bisexual Males on College Campuses**

Oscar Perez, MSW, CHW, Avenue 360 Health & Wellness

Maria Wilson, LMSW, LVN, University of Houston

This workshop will describe a community centered, multi-level intervention, SMART Cougars (SC), for youth adults, and discuss the role of rapid HIV testing on college campuses for gay and bisexual male youth of color. SC reduces barriers to HIV testing usually present in traditional clinical setting.

### **Objectives:**

1. Identify methods and approaches for innovative and community centered sexual health and HIV testing resources on a college campus.
2. Use research results to inform the need for geographic location, gender, and minority specific HIV interventions that consist of university and community-based collaborations.
3. Learn about research-informed strategies such as peer led health events and innovative social media HIV education and prevention as a tool to connect the public with health professionals in community agencies and on college/university campuses.

## **Leaning In, Linking, and Lifting Rural Minority Youth Voices in Health Initiatives**

Justin Lofton, BS, Teen Health Mississippi

Lionel Mack, Teen Health Mississippi

Ilesha Hayes, Teen Health Mississippi

Alexis Hicks, MS, BA, Teen Health Mississippi

A new tech-based project, led by rural and minority youth, has seen more than 16,000 views in its work linking rural minority youth to youth-friendly mental and sexual and reproductive health resources. Hear insight and gain practical tips from the youth leaders and adults partners of this project.

### **Objectives:**

1. Understand and identify at least three unique barriers that rural and/or minority youth face accessing youth-friendly mental and sexual and reproductive health care.
2. Describe the importance of leaning in and listening to youth voices, linking youth voices to leadership opportunities, and lifting youth voices to increase access to youth-friendly health care.
3. Identify at least one action that can be taken in the next 30 days to ensure rural and/or minority youth voices are included in their work.

## 11:15 AM - 12:15 PM // BREAKOUT SESSION 2

### **Working on Positive Youth Development: Looking Beyond Prevention of the "Bad Stuff" (repeated)**

Becky McFarland, MA, DuPage County Health Department

Rabia Mukhtar, MPH, DuPage County Health Department

### **Family-Based Treatment for Adolescent Eating Disorders: Why? How? Who? (repeated)**

Kate Fawcett, LMSW, Michigan Medicine Comprehensive Eating Disorders Program

Jessica Van Huysse, PhD, Michigan Medicine Comprehensive Eating Disorders Program

Terrill Bravender, MD, MPH, University of Michigan Department of Pediatrics

### **Concepts in Primary Care of Adolescents and Young Adults Affected by Violent Injury: A Case-Based Approach (repeated)**

Meredithe McNamara, MD, University of Illinois - Chicago

Jacqueline Korpics, MD, Cook County Health Systems

### **All are Welcome Here: Removing Ableism and Heteronormativity from Sexuality Education (repeated)**

Sarah Dahlston, MS, CHES, CSE, Planned Parenthood Southwest Ohio



## 12:15 PM - 1:30 PM // LUNCH & PLENARY PRESENTATION

### **Mental Health Practice with Immigrant and Refugee Youth**

Jeffrey Winer, PhD, Refugee Trauma and Resilience Center, Boston Children's Hospital / Harvard Medical School

Presentation will provide a framework and evidence-based strategies to guide providers who work with refugee and immigrant youth and families. Presentation will explore the unique needs and challenges of serving refugee and immigrant youth and families. Presentation will offer concrete steps for providing evidence-based, culturally-responsive care across the social ecology.

#### **Objectives:**

1. Introduce Refugee and Immigrant Four Core Stressors Framework.
2. Outline key strategies for building effective refugee and immigrant youth intervention programs.
3. Discuss evidence-based strategies to support individual, family, and community resilience within refugee and immigrant communities.

## 1:45 PM - 2:45 PM // MENTAL HEALTH ORAL PRESENTATIONS

### **Corktown Health: A Collaborative Approach to Comprehensive Primary and Behavioral Health Care**

Jay Fallon, LMSW, Corktown Health Center

Latonya Riddle-Jones, MD, Wayne State University SOM, Corktown Health Center

Showcasing a Collaborative Care Approach to primary care & behavioral health care in a clinical setting focused on serving both the LGBTQ community & individuals living with HIV. An approach that can be applied to most primary care office settings, and many adolescent care needs, all under one roof.

#### **Objectives:**

1. Recognize how behavioral health impacts overall health outcomes for young adults, specifically those that identify as LGBTQ, or living with HIV.
2. List at least 3 chronic health conditions encountered in primary care offices that place adolescents at high risk of needing behavioral health intervention/treatment.
3. Describe a collaborative care approach to successfully integrate primary medical care and mental health services in one clinical setting, especially for LGBTQ patients.

## **Speaking the Same Language: Developments of TRAILS SEL Curriculum**

Michelle McMahon, LMSW, TRAILS: University of Michigan Department of Psychiatry

TRAILS has developed an innovative Social and Emotional Learning (SEL) curriculum designed to bridge evidence-based cognitive behavioral therapy (CBT) and mindfulness techniques with Michigan's 5 SEL Competencies. Development strategies and curriculum content will be discussed.

### **Objectives:**

1. Identify and describe Michigan's 5 SEL Competencies.
2. Describe at least 1-2 core CBT and mindfulness techniques that can be utilized effectively in the classroom.
3. Describe how bridging SEL with evidence-based mental health techniques (CBT and mindfulness) in tier 1 provides a multi-tiered system of mental health support for students.

## **Disease Burnout: Keeping the Fire Lit**

Dana Albright, PhD, CS Mott Children's Hospital

Chronic illness requires a lifetime of management behaviors. Remaining engaged across the lifespan, particularly in adolescence, is a challenge even more the most resilient individuals. This session will review the most recent research on contributing factors to burnout and resilience and share practical strategies to promote resilience in adolescents.

### **Objectives:**

1. Briefly review relevant research on factors associated with burnout related to chronic health conditions, specifically diabetes.
2. Understand relevant research on promoting resilience in adolescent and young adult patients living with chronic health conditions.
3. Identify practical strategies to reduce burnout and support resilience in adolescents and young adults.

## 1:45 PM - 2:45 PM // BREAKOUT SESSION 3

### **Observe How They Serve: Evaluating Youth-led Assessment Tools**

Valerie Gavrila, MPH, Adolescent Health Initiative

Lauren Vasquez, MS, CHES, Adolescent Health Initiative

Tory Sparks, Michigan Organization on Adolescent Sexual Health

Youth-driven health center assessments are a powerful approach to generate meaningful learning and feedback for health centers serving adolescents. AHI and MOASH each developed a similar youth-informed tool to assess the youth-friendliness of medical clinics. An analysis of the reliability and validity of these tools will be discussed.

#### **Objectives:**

1. Discuss importance of youth-led health center assessments.
2. Examine youth processes in evaluating reliability and validity of the two tools and discuss possible future replication of methods by participants.
3. Provide guidance for implementation of youth-led assessment tools as a standard of practice.

### **BLOOM365: A Teen-Driven Movement to End Teen Dating Abuse**

Erin Callinan, MSW, BLOOM365

Isabella D, BLOOM365

BLOOM365 utilizes a teen-driven approach to end teen dating abuse and cultivate safe and healthy relationships. We are a teen-led and teen-informed movement that extends beyond traditional prevention education to empower and support teens in transformational leadership and advocacy experiences.

#### **Objectives:**

1. Participants of this session will critically consider the root causes of teen dating abuse and identify places and spaces in which these root causes are perpetuated on interpersonal, relationship, community and societal levels.
2. Participants of this session will learn specific approaches teens in BLOOM365 are generating and enacting to create change and support young survivors of abuse or assault.
3. Participants of this session will consider effective youth participatory action approaches to mobilize and inspire teens to advocate for change and become leaders in their community.

## **Adolescent-Centered Contraception: Shared Decision Making as a Model for Contraceptive Counseling**

Alana Otto, MD, MPH, University of Michigan Department of Pediatrics, Division of Adolescent Medicine

This session will describe a patient-centered model for contraceptive care and contrast this with traditional paradigms of contraceptive counseling for adolescents. It will summarize research on shared decision making in contraception and consider how this model may be applied to adolescents.

### **Objectives:**

1. Describe methods of contraceptive counseling and the advantages and drawbacks associated with each method.
2. Consider factors other than effectiveness that may influence adolescents' contraceptive choices.
3. Apply principles of shared decision making to contraceptive care for adolescents.

## 3:00 PM - 4:00 PM // COMMUNITY PROGRAMS & SCHOOL-BASED HEALTH ORAL PRESENTATIONS

### **Implementation of a Human Trafficking Protocol in School-Based Health Centers**

Angela Kuznia, MD, MPH, University of Michigan Department of Family Medicine/Regional Alliance for Healthy Schools

Katelyn Bailey, DNP, RN, CPNP-PC, Michigan Medicine Regional Alliance for Healthy Schools

Steve Park, MD, Michigan Medicine Department of Pediatrics, Regional Alliance for Healthy Schools

Bernie Stoody, MD, MS, University of Michigan Department of Pediatrics

An adolescent trafficking screening tool and protocol was implemented in school-based health centers. Health center staff's awareness of human trafficking pre- and post- intervention was measured. Positive screens were tracked to determine trafficking rates and the tool's positive predictive value.

#### **Objectives:**

1. Describe the problem of human trafficking, its impact on the adolescent population, and available evidence on human trafficking screening tools.
2. Recognize the important role of school-based health centers in human trafficking screening and identification of possible cases.
3. Analyze health center staff improvements in knowledge, attitudes and behaviors about human trafficking screening with implementation of this quality improvement project.

## **Story Circles as a Research Method to Deepen Understanding of Adolescent Experiences**

Elizabeth Futrell, MSPH, Ci3 at the University of Chicago

This workshop will introduce story circles as a participatory narrative research method. Facilitators will present youth voices from Ci3's research on the South Side of Chicago and in Lucknow, Uttar Pradesh, India.

Participants will take part in a story circle and explore new uses of the method.

### **Objectives:**

1. Articulate the value of using participatory narrative research methods for adolescent sexual and reproductive health.
2. Lead a story circle—a foundational method for narrative-based participatory research.
3. Access tips and tools for applying participatory narrative research methods—specifically story circles and digital storytelling—in participants' own work.

## **Let's Keep it REAL about Marijuana Abuse Prevention in Our Communities**

Dorothy Smith, Teen HYPE

David Cordova, PhD, University of Michigan, School of Social Work

During this session we will highlight: ways Teen HYPE staff applied the Strategic Prevention Framework (SPF) to guide the "Greater Than Project", innovative approaches to ensuring youth voice throughout a project, and sustainable measures for youth & community engagement to achieve project outcomes.

### **Objectives:**

1. Apply the Strategic Prevention Framework (SPF Model) to any prevention effort.
2. Identify methods for maximizing youth & community voice throughout a project.
3. Give examples of ways to effectively address challenges during program implementation & evaluation.

## 3:00 PM - 4:00 PM // BREAKOUT SESSION 4

### **Observe How They Serve: Evaluating Youth-led Assessment Tools (repeated)**

Valerie Gavrila, MPH, Adolescent Health Initiative

Lauren Vasquez, MS, CHES, Adolescent Health Initiative

Tory Sparks, Michigan Organization on Adolescent Sexual Health

### **BLOOM365: A Teen-Driven Movement to End Teen Dating Abuse (repeated)**

Erin Callinan, MSW, BLOOM365

Isabella D, BLOOM365

### **Adolescent-Centered Contraception: Shared Decision Making as a Model for Contraceptive Counseling (repeated)**

Alana Otto, MD, MPH, University of Michigan Department of Pediatrics, Division of Adolescent Medicine

## 4:00 PM - 5:30 PM // NETWORKING RECEPTION YOUTH PERFORMANCE

### **Motor City Street Dance Academy**

## DETAILED AGENDA // DAY 2

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### 8:30 AM - 9:30 AM // KEYNOTE PRESENTATION

#### **Ally is a Verb: Showing up and Standing up for LGBTQ+ Adolescents**

Genya Shimkin, MPH, Q Card Project, LLC

This session is designed for professionals who want to better serve LGBTQ+ adolescents. Through interactive activities and dialogue, attendees will explore their own identities- both privileged and marginalized- and build a toolkit for advocacy and allyship for gender-diverse and sexual minority youth.

#### **Objectives:**

1. Define the difference between sexual orientation and gender identity, and name their own identities.
2. Leverage their privileged identities to advocate for LGBTQ+ adolescents.
3. Engage with LGBTQ+ adolescents through thoughtful consideration of intersecting identities and power systems.

### 9:45 AM - 10:45 AM // SEXUAL HEALTH ORAL PRESENTATIONS

#### **Web and Venue-based Sampling for Substance-using Sexual and Gender Minorities**

Jayelin Parker, MPH, University of Michigan - Center for Sexuality and Health Disparities

Alexis Hunter, MA, University of Michigan - Center for Sexuality and Health Disparities

We hope to present our research to share best methods and challenges of online and venue-based recruitment methods for substance-using, young men who have sex with men (MSM) and transgender persons in Southeast Michigan between the ages of 15 and 29.

#### **Objectives:**

1. Understand their audience for better recruitment.
2. Understand language and images of advertisements matters when recruiting for sexual health and adolescents.
3. Understand that retention is important when maintaining enrollment in programs/projects.



## **Project Youth TEACH: A Secondary Prevention Program for Young People Living with HIV**

Emily Gus, MPH, Philadelphia FIGHT

Youth TEACH (Treatment Education Activists Combating HIV) empowers young adults, living with HIV to understand HIV, advocacy, and medication. YT classes are secondary prevention, reducing the number of new HIV infections by supporting PLWHA. We will cover program barriers and the lens we use.

### **Objectives:**

1. Describe the basic elements of the Youth TEACH program.
2. Understand common barriers facing programs supporting young people living with HIV/AIDS.
3. Define secondary and primary prevention.

## **How Can We Provide High-quality Sex Education to System-involved Youth?**

Valerie Sedivy, PhD, Healthy Teen Network

What does it take to provide high-quality sexual health education to system-involved youth? In this interactive workshop, participants will explore reasons for tailoring sex education for this group and ways to do it, along with strategies for overcoming facilitation challenges.

### **Objectives:**

1. Identify at least three reasons why youth who are system-involved need sex education that is tailored for their unique needs.
2. Describe the characteristics of an evidence-based curriculum that is designed to meet the sexual health education needs of youth who are system-involved.
3. List at least three facilitation strategies to use when implementing sex education with youth who are system-involved.

## 9:45 AM - 10:45 AM // BREAKOUT SESSION 5

### **Navigating the Trauma of Community Violence as a Youth/Young Adult in Detroit**

Mary Mueller, LMSW, Michigan Department of Health and Human Services, Division of Child and Adolescent Health

Calvin Evans, Detroit Life is Valuable Everyday (DLIVE)

Youth Co-Presenters

A framework will be presented to understand how community violence influences the mental health of Detroit's youth and the community. First-person perspectives from different experimental layers, effective solutions, and the challenges in creating those solutions will be discussed. The audience will leave with an understanding of how community toxic stress is maintained, as well as insight into effective strategies on how to reduce it.

#### **Objectives:**

1. Learn firsthand of the intimate challenges of young adults in Detroit face following traumatic injury from community violence.
2. Learn effective strategies that have shifted the way mental health is viewed amongst those impacted by community violence.
3. Learn of the impact DLIVE's mental health program has had on survivors of injury from community violence.

### **Identifying and Supporting Adolescent Victims of Trafficking and Sex Exploitation**

Jenni Lane, MA, Adolescent Health Initiative

Azzia Roberts, MPH, CHES, Adolescent Health Initiative

Health care professionals are missing opportunities to identify and support victims of trafficking. This session includes an interactive, ready-to-use mini-training designed for staff and providers, recognizing that everyone can play a part in identifying and supporting victims of trafficking.

#### **Objectives:**

1. Identify signs of human trafficking and sexual exploitation among adolescent and young adults.
2. Describe strategies for providers and staff to support trafficked and sexually exploited adolescents.
3. Receive resources for training and further learning beyond the session.

## Ten Core Competencies for Youth Mental Health Systems

Nia West-Bey, PhD, CLASP

Whitney Bunts, MSW, CLASP

Kadesha Mitchell, Prince George's County PATH Team

This session will provide an overview of 10 competency areas for meeting the mental health needs of transition-age youth. Hear from a county representative about how their system applied the competencies and engage in discussion about how to adopt and apply the competencies for system improvement.

### Objectives:

1. Recognize that a range of core competencies are critical to supporting youth and young adult mental health.
2. Discuss an example of the practical application of these core competencies in a county-level system.
3. Identify opportunities to prioritize and apply one or more of the core competency areas to their own work

## 11:00 AM - 12:00 PM // MENTAL HEALTH ORAL PRESENTATIONS

### The Essential Role of Parents in Reducing Adolescent Substance Use Risk

Linda Richter, PhD, Center on Addiction

The influence of parents on children's attitudes and behaviors is immense, even in the face of countless environmental pressures to engage in unhealthy behaviors. A nationally representative survey of teens examined the important role parents play in reducing the risk of adolescent substance use.

### Objectives:

1. Describe the importance of positive, engaged parenting and monitoring in protecting teens from substance use risk.
2. Apply lessons from the survey findings to specific parenting skills and practices.
3. Help empower parents to engage in prevention/early intervention efforts at the government, community, and school levels as well as in the family.

## **Gender Identity, Psychological Distress, and Suicidality: Implications for Working with Transgender Youth**

Michael Miller-Perusse, BSc, Center for Sexuality and Health Disparities

Transgender youth (TY) have been identified as a high-risk population for mental health difficulties, including psychological distress and suicidality. This presentation examines factors associated with these outcomes in a national sample of TY using a transgender-specific minority stress framework.

### **Objectives:**

1. Identify relative psychological distress and suicidality risk for transgender populations.
2. Summarize the factors of gender minority stress and resilience which were associated with recent psychological distress and suicidality in the Project Moxie sample.
3. Make recommendations for working with transgender youth to avoid or alleviate potential psychological distress

## **Addressing Adolescent Cannabis Use in Brief Clinical Encounters: Timely Topics eLearning Module**

Aisling Zhao, BA, University of Michigan Medical School

How do our personal views toward marijuana impact our interactions with adolescent patients? How is adolescent confidentiality negotiated when cannabis is involved? Come to this presentation for an interactive presentation about the uncertainties and best practices around cannabis use in youth.

### **Objectives:**

1. Identify how our personal views toward marijuana can impact our interactions with adolescent patients.
2. Identify primary forms of marijuana delivery, including youth culture terms.
3. Outline the neurodevelopmental characteristics that make marijuana use attractive to adolescents.
4. List strategies for screening and counseling in brief clinical encounters.
5. Identify best practices in adolescent treatment for marijuana.

## 11:00 AM - 12:00 PM // BREAKOUT SESSION 6

### **Navigating the Trauma of Community Violence as a Youth/Young Adult in Detroit (repeated)**

Mary Mueller, LMSW, Michigan Department of Health and Human Services, Division of Child and Adolescent Health

Calvin Evans, Detroit Life is Valuable Everyday (DLIVE)

Youth Co-Presenters

### **Identifying and Supporting Adolescent Victims of Trafficking and Sex Exploitation**

Jenni Lane, MA, Adolescent Health Initiative

Azzia Roberts, MPH, CHES, Adolescent Health Initiative

### **Ten Core Competencies for Youth Mental Health Systems (repeated)**

Nia West-Bey, PhD, CLASP

Whitney Bunts, MSW

Kadesha Mitchell, Prince George's County PATH Team

## 12:00 PM - 1:15 PM // YOUTH LUNCH PRESENTATION

### **To be announced.**

To be announced.

To be announced.

## 1:30 PM - 2:30 PM // BREAKOUT SESSION 7

### **Abnormal Uterine Bleeding and PCOS in Adolescents**

Melina Dendrinis, MD, Michigan Medicine Department of Obstetrics and Gynecology

A discussion of the diagnosis and evaluation of abnormal uterine bleeding in adolescents, as well as the diagnosis and treatment of PCOS in adolescents.

#### **Objectives:**

1. Define normal menses for an adolescent.
2. Evaluate abnormal uterine bleeding in an adolescent.
3. Describe diagnostic criteria for PCOS in adolescent -Identify treatment options for PCOS in adolescents

### **Navigating Sexuality Education in Rural Communities**

Jessica Estrada, BA, Planned Parenthood of Columbia Willamette

Sara Kukkonen, AS, BA, Planned Parenthood of the Great Northwest and the Hawaiian Islands

Janet Flores, Planned Parenthood

Join us as we navigate the unique challenges of bringing sexual health education to youth in rural areas. We'll work through real life scenarios that can come up when working in more conservative environments and share what has worked for us, including our work with Youth Leadership Councils.

#### **Objectives:**

1. Identify the strengths and challenges of working in rural communities.
2. Learn tools for approaching different types of partners; schools & nontraditional educational settings.
3. Learn strategies for recruiting youth and community members for community mobilization groups

## **It Doesn't Have to Hurt: Caring for Youth with Somatization**

Kristin Kullgren, PhD, Michigan Medicine/CS Mott Children's Hospital

Nasuh Malas, MD, MPH, Michigan Medicine/Department of Psychiatry

Kimberly Monroe, MD, MA, Michigan Medicine/CS Mott Children's Hospital

Adolescents with Somatic Symptom and Related Disorders (SSRD) present with significant management challenges. This session will focus on the identification, evaluation, formulation, and management of SSRDs with specific focus on communication strategies across settings.

### **Objectives:**

1. Identify the biopsychosocial predisposing, precipitating and perpetuating risk factors influencing the care of youth with Somatic Symptom and Related Disorders.
2. Review and practice evidence-based communication strategies and other management approaches in the care of youth with Somatic Symptom and Related Disorders.
3. Explore the current literature base and models for standardized care among youth with SSRDs including an institutional model developed at the University of Michigan as well as a national care standard developed by the American Academy of Child and Adolescent Psychiatry

## **PopPorn: Implementing the PopCulture and Pornography Education Program**

Megan Maas, PhD, Michigan State University

This session offers an overview of our Pop Culture and Pornography Education program (PopPorn). How pop culture and pornography shape our sexuality and consequently, our sexual decision-making is addressed. Excerpts of this program will be provided to offer interactive elements.

### **Objectives:**

1. Identify 2 processes that make adolescents more vulnerable to pornography influences than adults.
2. Determine if and how an on-screen romantic relationship is abusive.
3. Apply 2 cultural concepts that perpetuate violence against women, and subsequent sexual health disparities.

## **Primary Care for Adolescents with Autism Spectrum Disorder**

Jill Matson, MSN, RN, CPNP, Autism Alliance of Michigan

This session will discuss the challenges in caring for adolescents with autism in the primary care setting. Identification and management of associated medical and mental health problems, strategies for transition to adult providers, and tips for successful office visits will be presented.

### **Objectives:**

1. Identify common medical and mental health problems associated with autism.
2. Identify strategies for the successful transition of adolescents with autism to adult primary care providers.
3. Identify accommodations that can be implemented in the clinic setting to lessen communication, behavior, and sensory difficulties.

## **2:45 PM - 3:45 PM // BREAKOUT SESSION 8**

### **Abnormal Uterine Bleeding and PCOS in Adolescents (repeated)**

Melina Dendrinis, MD, Michigan Medicine Department of Obstetrics and Gynecology

### **Navigating Sexuality Education in Rural Communities (repeated)**

Jessica Estrada, BA, Planned Parenthood of Columbia Willamette

Sara Kukkonen, AS, BA, Planned Parenthood of the Great Northwest and the Hawaiian Islands

### **It doesn't have to hurt: Caring for youth with somatization (repeated)**

Kristin Kullgren, PhD, Michigan Medicine/CS Mott Children's Hospital

Nasuh Malas, MD, MPH, Michigan Medicine/Department of Psychiatry

Kimberly Monroe, MD, MA, Michigan Medicine/CS Mott Children's Hospital

### **PopPorn: Implementing the PopCulture and Pornography Education Program (repeated)**

Megan Maas, PhD, Michigan State University

### **Primary Care for Adolescents with Autism Spectrum Disorder (repeated)**

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