



SBHCs + GRADS = Better Health

Healthcare Support for Parenting Teens



What Care Can School Based Health Centers Provide for Expectant and Parenting Teens?

The following is an overview of the types of care that are and are not available in SBHCs for Expectant and Parenting Teens. While SBHCs cannot typically provide prenatal care for pregnant teens, there are many other health care services available which can support the health of young parents. Please check with the specific SBHC to find out what kinds of care they may provide. Please note that this brief focuses on young mothers, but there is also a brief focusing on young fathers.

What Physical Health Care CAN SBHCs Provide?

SBHCs can provide some types of care for women who want to prevent pregnancy, think they may be pregnant, know they are pregnant, or have already given birth. Some percentage of a young mother's healthcare concerns are likely to be able to be addressed by an SBHC if one is available on their campus. The following types of care, organized by needs that a young woman may have while pregnant or after delivery of her child, may be available at an SBHC.

For Pregnant Mothers:

- Care related to the pregnancy in the time before prenatal care is available. Examples include pregnancy testing, referrals for obstetrician or nurse midwife, assisting with Medicaid enrollment, etc. Other available care can include:
 - The SBHC medical practitioner may provide prenatal evaluation and follow-up while the student is establishing a medical home for her pregnancy. Typically, blood pressure readings, weight checks, urine tests, and palpation of the abdomen can be performed at the SBHC.
 - Education and counseling regarding exercise, nutrition, use of over-the-counter medications and avoidance of tobacco, alcohol and illegal drugs.
 - Assessment of the student's social and family support is also very important. Involvement of the student's parent, the child's father, and/or the significant other is encouraged.
 - Education and assessment of risk factors and plan of care for postpartum depression should also be offered during pregnancy.
 - Assessment and education for preparation of infant care.
- Acute care unrelated to the pregnancy should also be provided. Examples may include an upper respiratory infection, minor injury, etc.
- Symptomatic care related to the pregnancy that does not need immediate intervention from the obstetrician or other provider. Examples may include nausea, constipation, back pain or a headache. In many cases, treatment of these symptoms will be communicated back to the obstetric provider to coordinate care.
- Requests for medical advice related to the pregnancy should also be provided. Examples may include questions about prenatal vitamins, management of fatigue during the school day, recommended immunizations and others.
- The SBHC provider should be available for consultation and assist in daily management of care in coordination with the obstetrician, or nurse midwife as needed.

For more information on this and other NMASBHC Best Practice and Tip Sheets related to healthcare for expectant and parenting teens, please visit NMASBHC's website at www.nmasbhc.org or contact NMASBHC at (505) 404-8059. Please note that the contents of these tip sheets are general and not a replacement for information from the sponsoring agencies or healthcare providers.

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What Physical Health Care CAN SBHCs Provide

For New Mothers:

- Acute care unrelated to childbirth may need additional advice linked to motherhood. Examples may include flu, injury, chronic fatigue, etc. that could impact the health of their child as well.
- Symptomatic care related to the postnatal period that may need more immediate care than available through the mother's obstetrician or other care givers. Examples may include care for breast pain related to breastfeeding, vaginal bleeding, nutritional concerns, etc.
- Requests for medical care only tangentially related to the pregnancy and childbirth such as contraceptive services and annual comprehensive wellness exams.

What Behavioral Health Care CAN SBHCs Provide?

For Pregnant Mothers and New Mothers:

- Individual counseling to manage any behavioral health needs, including those related to the new responsibilities of parenthood. SBHCs may choose to refer out for postpartum depression or anxiety if they feel there is expertise in the community greater than their own.
- Group counseling for expectant and/or parenting teens. This may include a collaborative design with GRADS staff.

What Physical Health Care can SBHCs NOT Provide?

Some percentage of a young mother's healthcare concerns are likely to be addressed outside of an SBHC. The following types of care, organized by needs that a young woman may have while pregnant or after delivery of her child, are those that are unlikely to be available at an SBHC.

For Pregnant Mothers:

- Ongoing recommended prenatal care which is most appropriately provided by caregivers with special licensure and experience.
- Acute care which may have a significant impact on the pregnancy. For example, unexplained fever, an abdominal injury, severe headache, severe vomiting, severe bleeding, or elevated blood pressure.
- Symptomatic care related to the pregnancy that may need immediate intervention from the obstetrician or other provider. Examples may include vaginal bleeding, potential membrane rupture, or high blood pressure. In some cases, the SBHC provider could assist in daily management of care in coordination with the obstetrician.

For New Mothers:

- Acute care unrelated to the childbirth that may have significant impact on postnatal care such as high blood pressure or injury.
- Symptomatic care related to the postnatal period that may need care that only the mother's obstetrician or other caregiver can provide.
- If a student/patient has had a C-section delivery, she should be followed by her obstetric provider for the 4 or 6-week and 3 month post-partum follow-up. This is not care that would be provided in the SBHC.
- Requests for medical care only tangentially related to the pregnancy and childbirth, but that must be performed by the obstetric provider, such as IUD insertion that will happen immediately post-delivery.

What Behavioral Health Care can SBHCs NOT Provide?

For Pregnant Mothers and New Mothers:

- SBHCs may choose to refer out for postpartum depression or anxiety if they feel there is expertise in the community greater than their own.

Summary

New Mexico SBHCs and GRADS classes may wish to share with Expectant and Parenting Teens the types of care that they can expect to access at an SBHC, and which ones may be referred out to another provider. Explaining the referral process and the differences between primary care providers and specialists can be a helpful health literacy lesson for young people. Note: should an SBHC wish to provide other services based on their clinicians' experience, the clinic's protocols and back-up, and the sponsor feels they can do so safely and confidently, they may wish to do so; however, they may wish to consult the Office of School and Adolescent Health for any clarification.