

## WHY I CREATED SENSA

My name is Hema Shamnarine and I created the SENSA model. If you're here, I can assume you are seeking guidance on supporting a pregnant or parenting teen. First, I would like to thank you for taking on the role of supporting this teen instead of judging them. Pregnant teens already face judgment by their families, peers, and schools. What they need, now more than ever, is our support and guidance. Before diving into what SENSA is and how you can use it, I'd like to share how my experience helped me create this model. Early in my career, I worked in a school that had a high population of pregnant teens and teen parents. In my work with these teens I learned that they have some needs that are similar to pregnant and parenting adults, and some needs that are unique. There were many domains that they needed support in, including their romantic relationship; the logistics of pregnancy, childbirth, and parenting; access to resources (and an understanding of what resources they needed); and advocacy (including a need to develop self-advocacy skills). Often the teen's romantic relationship included

elements of teen dating violence (TDV) or unhealthy habits. This was an added stressor during the already challenging experience of being a pregnant teen. Furthermore, many of these teens were not aware of their rights and responsibilities through pregnancy, childbirth, and child-rearing and lacked a support system to learn from. Additionally, as teens, they often had financial, housing, or healthcare needs that would be exacerbated by pregnancy and childrearing. They needed guidance on the resources available to them. In addition to these tangible needs, these teens often faced judgment requiring my professional advocacy as well as development of their own self-advocacy skills. As a school social worker, these needs can feel daunting. I created the SENSA model to help provide guidance for school social workers to support pregnant and parenting teens in each of these domains, along with the resources to do so. Throughout this guide, you will find a description of each component of the SENSA model, as well as how to use the resources as part of the model.



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## THE ACRONYM

Below is a detailed description of each component of the SENSA model

#### STAGES OF CHANGE

Often times, pregnant and parenting youth are involved in romantic relationships that can be risk factors for their wellbeing (Assini-Meytin et al., 2018). The stages of change and decisional balance can help pregnant and parenting teens with clinical processing of the health of the their relationship, including whether to remain in the relationship, and any harms the relationship may pose to them.

#### EMOTIONAL SUPPORT & EMPATHY

As clinicians, we know the power of therapy, especially with youth. Therapy is an essential component to the SENSA model and emotional support and empathy are key to therapy with pregnant and parenting youth, especially those experiencing TDV. However, they are also important through all parts of SENSA. Pregnant and parenting teens often lack the support they need from parents, peers, and community, so it is essential that emotional support and empathy are at the core of any work with them. If they are experiencing TDV it is even more important that they receive therapeutic support.

## NEEDS ASSESSMENT & SERVICE PROVISION

Since pregnant and parenting teens often lack support (Huang et al., 2019) they may also lack guidance on the resources and services they need, which can be exacerbated by TDV. Therefore, a needs assessment is a crucial step to understanding the resources and services that they need. Use this needs assessment to understand the resources your client may need. After the needs assessment you can provide for the needs that you are equipped to while helping the pregnant or parenting teen access resources and services from other providers through networking, referrals, and any necessary vetting.

#### ADVOCACY

Advocacy in the SENSA model is two-fold: professional advocacy and self-advocacy. The school social worker can use their role as a service provider and professional to advocate on behalf of the pregnant or parenting teen. This can include advocacy with other service providers, parents, teachers and other school stakeholders. Self-advocacy, on the other hand, involves empowering the pregnant or parenting teen to advocate for themselves with similar stakeholders to help them build this skill. Helping teens build self-advocacy skills is also essential to helping them navigate TDV.

Assini-Meytin, L. C., Mitchell, S. J., & Lewin, A. (2018). Support relationships and teen mothers' school retention at one-year postpartum. Journal of Community Psychology, 46(6), 734-746. <a href="https://doi.org/10.1002/jcop.21969">https://doi.org/10.1002/jcop.21969</a>

Huang, C. Y., Roberts, Y. H., Costeines, J., & Kaufman, J. S. (2019). Longitudinal trajectories of parenting stress among ethnic minority adolescent mothers. Journal of Child and Family Studies, 28, 1368-1378. <a href="https://doi.org/to.too7/sto826-019-01356-1">https://doi.org/to.too7/sto826-019-01356-1</a>

## TOOLS FOR SENSA

THE TOOLS REQUIRED FOR SENSA
AND HOW TO USE THEM



## STAGES OF Change

As a social worker you may be familiar with the Stages of Change model and its broad applications. As part of SENSA, the Stages of Change model is used in the therapeutic work to assess the pregnant or parenting teen's readiness to leave their romantic relationship, particularly if the relationship involves teen dating violence (TDV). Additionally, you can use the decisional balance to help the teen weigh the benefits and risks of staying in or leaving the relationship.

## NEEDS ASSESSMENT

In addition to their need for support and information, many pregnant and parenting teens need tangible resources. Using the SENSA needs assessment can help you identify the resources that they need and provide a space for you to create a plan with the teen for meeting those needs. This needs assessment also includes templates for two different types of eco maps (depending on which you have the capacity and need for) to map out the teen's support system.

# BIRTH PLAN & HOSPITAL BAG CHECKLIST

Pregnant and parenting teens often have little information on the logistics of pregnancy and birthing. They also often lack the social and familial support that pregnant and parenting adults often have to help them learn this information in a supportive and non-judgmental way. As a school social worker, you can help the teen create a birth plan and hospital bag checklist to support in their preparation and inform them on the logistics of the birthing experience that they may be unfamiliar with.

## SAFETY PLAN & SELF CARE PLAN

A safety plan may or may not be necessary for a pregnant or parenting teen. However, if they are in a romantic relationship that involves TDV a safety plan is necessary. Additionally, a self care plan can be useful, especially if a safety plan is not created. It is similar to a safety plan but is used when the teen is not facing significant risk.

## STAGES OF Change

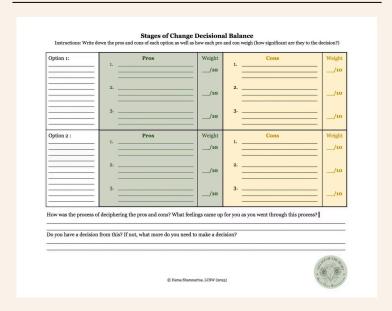


#### Click here for the Stages of Change infographic

The Stages of Change model was developed by Prochaska and DiClemente (1982) as the trans-theoretical model of change and is applied in the SENSA model to understand the readiness of the pregnant or parenting teen to leave their romantic relationship. This is an especially essential component when the teen is involved in a romantic relationship that includes any form of teen dating violence (TDV) or any unhealthy habits that may exacerbate the stressors they face while navigating pregnancy and/or childrearing. Using the Stages of Change model, you can assess what stage of change the teen is in, in terms of readiness to leave the relationship and support them accordingly.

Prochaska, J. O., & DiClemente, C. C. (1982). Transtheoretical therapy: Toward a more integrative model of change. Psychotherapy: Theory, Research, and Practice, 19(3), 276-288. https://psycnet.apa.org/doi/10.1097/h0088437

## D E C I S I O N A L B A L A N C E



#### Click here for the Decisional Balance

The idea of the decisional balance was proposed by Prochaska and Velicer (1997). I created this template as a tool to support the school social worker (SSW) in using the decisional balance to help the pregnant or parenting teen weigh the pros and cons of remaining in or leaving their relationship. Option 1 would be the option to stay. The SSW would support the client in understanding the benefits of staying (pros), and the risks of staying (cons). Option 2 would be the option to leave. Similarly, the SSW would support the client with understanding the benefits (pros) and risks (cons) of leaving. It is important to do both options because the benefits of one option and the risks of the other can be different. In the weight column the SSW would support the client in identifying how strongly each pro and con weighs in their decision-making. Underneath the chart are prompts for processing.

Prochaska, J. O., & Velicer, W. F. (1997). The transtheoretical model of health behavior change. American Journal of health Promotion, 12(1), 38-48. https://doi.org/10.4278/0890-1171-12.1.38

## NEEDS ASSESSMENT

Name:	Key Stakeholders (Name, room)	Ok to contact
DOB: Contact: City, State:	Social worker: Guidance counselor: Other key school staff:	contact
Key concerns:	Parent: Other family member: Other key stakeholder:	
Resource domain	Specific needs (detail the specific resources the client needs in this domain)	Needed
Food		
Cash		
Housing		
Health insurance		
Mental health		
Pre-/postnatal healthcare		
Pre-/postnatal supplies		
Birth plan		
Safety plan		
Self care plan		
Other:		
Next Steps		
1.		
3-		
2.	See The Control of th	

## Click here for the Needs Assessment

Using this needs assessment the school social worker (SSW) can support the pregnant or parenting teen in understanding their needs with spaces to be specific about the needs presented. There is also space provided for documenting key stakeholders (including school support staff) along with indicators of which are ok to contact. There is also space to detail next steps in providing support. The second page of this needs assessment is a simplified eco map, which offers 8 circles to document support people in the teen's life. Using the key, draw lines and arrows to indicate the strength of these relationships. The third page is a complete eco map in which the SSW would document as many supports as needed, using the distance from the center to document the closeness of the relationships (and the same key to document strength of relationships).

## BIRTH PLAN

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Hello, soon-to-be-mom! You may be j understandable. This birth plan is to he of those overwhelming feelings. Please able to have everything in this plan o you feel prepared and insp	elp you prepare for your birthin a understand that aivina birth c	g experience, and hopefu an be unpredictable, and ver, brainstorming your	lly help with some you might not be options can help
Name		Pronouns	Age
	Important Contacts		
OB/GYN (name/contact)			
Midwife (name/contact)			
Doula (name/contact)			
Hospital (name/address/contac	t)		
Lactation Consultant (name/co	mtact)		
Parent(s) (name/contact)			
Partner's (name/contact)			
	IPV / S	Safety Concerns	_
Ok to contact parent(s)?			
Ok to contact parent(s):			
OK to contact partner:			
Who gets a copy of this plan? (Name, role/position, contact)			
A staff member in your school sho	uld have a copy of your birth p	'an, in case you go into la	bor at school

### Click here for the Birth Plan Template

A birth plan can help a pregnant teen prepare for decisions related to their birthing experience. Preparing this beforehand and providing copies to the necessary people can help the teen be prepared for the birthing experience. The school social worker (SSW) can use this template with the teen to discuss their choices and rights related to birthing. It includes spaces to document the birthing and medical professionals that are supporting the teen through pregnancy, along with any IPV safety concerns that the teen might be experiencing. Along with this birth plan is a hospital bag checklist so the teen can prepare for the items they will need to take with them to the hospital.

## HOSPITAL BAG CHECKLIST

Birth pla Hospital B	ag Checklist
Essentials  Di Wallet  Keys  Birth plan  Insurance card  Clothes  Nursing bras or tank tops  Pajamas  Comfortable non-skid socks  Slip on shoes (for in the hospital)  Comfortable  Comfortable non-skid socks  Slip on shoes (for in the hospital)  Comfortable  Outfilt to go home in  Shoes to go home in  Shoes to go home in  Bonnet (if you wear one)	Toiletries  Toothbrush & Toothpaste  Face wash or face wipes & skin care  Deoderant  Shampoo & Conditioner  Lip balm & lotion  Hair ties / headbands  Glasses & Contacts (if you wear them)  Baby Items  Car seat  Onsies  Outfit to go home in  Bottles  Pediatrician's Information  Hat  Blankets / Swaddlle (for going home)
	Additional Personal Items  Additional Personal Items  Items with them to the hospital for their own other, pillow. blanket, toilletries)

## <u>Click here for the Hospital Bag Checklist</u>

Along with the birth plan is this hospital bag checklist, which includes many personal items and baby items the pregnant teen may need when they are in the hospital before, during, and after delivery. There are additional spaces at the bottom of the list for any personal items the teen may want or need that are not listed. This list can be used to help the teen pack their hospital bag prior to their due date.

## SAFETY PLAN

TDV Safety plan PLEASE CONSIDER THE SAFETY TIPS BELOW BEFORE CREATING THIS PLAN				
	sure to store this safety plan (virtual and physical copie a give permission to) can find it. If you must store this p			
partner (or other u	insafe person) can find it, please use vague language for	your safety (i.e when referring		
	laces, use code names or unspecific language). Consider this plan (i.e. vague language for a copy that could be ac			
specific language for	or a copy held under lock and key or on a password prot	tected device by a school social		
worker or other tru	asted adult). Leave out any information you feel is unne	cessary or unsafe to include.		
Risk level	Client name:	Age:		
High	Partner name:			
Moderate	Other unsafe people:	100		
Low				
Active Risks:	Physical Emotional Financial Sexual	Cyber Other		
Warning sign				
Warning sign Use this space to li	ist behaviors, words, or other indicators that your part	tner might be close to engagine		
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## Click here for the Safety Plan Template

A safety plan may or may not be necessary. It is up to you, as the school social worker (SSW) and the pregnant or parenting teen to determine if they are facing any risks warranting a safety plan. Any risks related to teen dating violence (TDV) warrant a safety plan.

## SELF CARE PLAN

Use this plan in moments when you're feeling down or feel life  **Triggers**  How do you know you need to start using your self care plant	•
Triggers How do you know you need to start using your self care plan!	? Triggers are unique to everyone.
How do you know you need to start using your self care plant	? Triggers are unique to everyone.
How do you know you need to start using your self care plant	? Triggers are unique to everyone.
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Things to do	
These are things that help you feel better, bring you joy, or ar different for everyone, but some examples include: eating, tal breathing exercises, journaling, coloring, watching your favor	king a walk, taking a shower, playing with a pet,
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Professional resources  □ NYC Well Phone: 1-888-692-9355	
Website: nycwell.cityofnewyork.us	o OF Tue
Text "WELL" to 65173	Se MEIII
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### Click here for the Self Care Template

A self care plan may not be necessary but can be helpful to prepare with a pregnant or parenting teen. Consider creating one with a teen especially if a safety plan is not created. A self care plan is similar to a safety plan but is created when there is no significant safety risk, but a need for the teen to plan for any triggers that disrupt their wellbeing.

# BIRTHING 101: PREPARING YOUR CLIENT

Pregnancy and birthing can be a scary experience for anyone, especially anyone going through this for the first time. For teenagers, this can be especially true. They are in a stage of life that is defined by navigating changes that can difficult. Teens also face stigma and judgment for being pregnant or having a child. This ultimately leaves them with limited support, a shadow of the village one is supposed to have when raising a child. This is where you can help. Using the SENSA model you can support these teens in various ways, including being a caring, non-judgmental adult. However, it is also important that as part of your support with these teens, you support them in being informed about the journey of pregnancy and birth so they can know what to expect.

The Cleveland Clinic and Cigna have provided resources for this purpose. They have created guides for pregnant people to learn about the ins and outs of pregnancy and how to have a healthy pregnancy and baby. The guide from The Cleveland Clinic provides information on the medical processes related to pregnancy as well as medical concerns that can arise. Cigna provides a similar guide with information about navigating pregnancy that also has spaces for documenting parts of the journey. You can use this guide to help your clients learn about pregnancy and birthing. This can also be a great resource for you to educate yourself on the nuances of pregnancy, if you are unfamiliar. Find these guides through the links below and in the resources toolkit on my website.

#### Cleveland Clinic Healthy Pregnancy Guide

#### Cigna Healthy Pregnancy Guide



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# BIRTHING RIGHTS: WHAT PREGNANT TEENS SHOULD KNOW

As social workers we know that racism and oppression are rampant in our nation and throughout many systems that we interact with on a regular basis. This includes the healthcare system -- the system that pregnant and parenting teens have to navigate through their pregnancy and after. Without knowing their rights, teens can be susceptible to the impacts of systemic racism and oppression during their pregnancy and birthing experience, which can turn an already stressful situation into one that is more challenging that it needs to be, and potentially even dangerous. While we do not want to instill fear in our clients, we want them to be prepared for the challenges they may face and know what their rights are as birthing people. In order to do this, we must prepare ourselves with this knowledge and have the appropriate resources to provide to our clients as they navigate this system.

The NYC Department of Health and Mental Hygiene has created guides for this very purpose. These guides were created by healthcare experts and are chockfull of knowledge to support pregnant people and the providers who support them (including you!) with extensive knowledge on what pregnant and birthing people should know about their rights, as well as concerns they may face. The client-facing guide even has scenarios to help pregnant people understand their rights in different circumstances, including their right to ask questions and get information about the medical processes they will be undergoing. These guides are thorough in their information and resources for both providers and pregnant people and even include resources for pregnant people experiencing IPV. Find the links to these guides below and in the resource toolkit on my website.

#### Provider-facing Guide

## Client-facing Guide

#### Client-facing brochure



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