Presented by
SYPP Center at Children’s Hospital Los Angeles

In partnership with LEAD Collaborative
About the LEAD Collaborative

Funded by OAH and coordinated by EngenderHealth, the LEAD Collaborative is a partnership between five organizations: the Adolescent Health Initiative at Michigan Medicine, the Center for Strengthening Youth Prevention Paradigms at Children's Hospital Los Angeles, EngenderHealth, the University of Massachusetts Donahue Institute, and Youth Catalytics.

The goal of the LEAD Collaborative is to provide OAH TPP grantees with meaningful opportunities to learn and engage with their peers and with the LEAD Collaborative members, accelerating their ability to design and implement high-quality, youth-centered programs.
Disclaimer

The views expressed in this workshop do not reflect the official policies of the Office of Adolescent Health, or the U.S. Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government. Any statements expressed are those of the presenters and do not necessarily reflect the views of the Office of Adolescent Health, or the U.S. Department of Health and Human Services.
SYPP Center

SYPP Center is excited to work with OAH TPP grantees on building safe and supportive environments for youth and their families, including addressing structural barriers to care.

Topics of focus will include LGBTQ inclusivity, trauma-informed approaches, positive youth development, and youth-adult partnerships.
SYPP Center

Center for Strengthening Youth Prevention Paradigms (SYPP Center) is a capacity building assistance provider at the Division of Adolescent & Young Adult Medicine at Children’s Hospital Los Angeles.

SYPP Center provides trainings and technical assistance to agencies, communities, coalitions and systems of care to address the social determinants of health that create inequities among youth.
(Re)frame the Narrative:
Creating Safe and Supportive Environments for Youth

Presented by: Mayra Serna and Sam Sunshine,
Training Coordinators
SYPP Center at Children’s Hospital Los Angeles
Objectives

By the end of this workshop, participants will be able to:

- Identify common deficit and strength based frameworks
- Apply strength based frameworks to reframe the narratives of youth and young adults
- Develop strategies and language to challenge mainstream narratives with positive and affirming perspectives
Icebreaker
Group Agreements

Make space, take space
Honesty
Try it on
Be present
Guided Imagery
Debrief Questions

• What came up for you as you heard this story?
• How are the strengths of this young person showing through her story?
• What is the role of educators and other providers in imposing and removing the barriers this student is facing?
What are frames?

“Frames are mental structures that shape the way we see the world. As a result they shape the goals we seek, the plans we make, the way we act, and what counts as a good or bad outcome of our actions. In politics our frames shape our policies and the institutions we form to carry out policies. To change our frames is to change all of this. Reframing is social change.”

George Lakoff
Deficit-based model

- Assumes that the person who is experiencing negative health or education outcomes does so due to internal deficits
- Influences organizational policy, thought, and practice and shaping perspectives toward marginalized peoples such as immigrants, young parents, LGBTQ youth, etc.
- Leads to analyzing social problems in terms of the deficiencies of individuals and developing programs aimed at correcting those deficiencies
Strength/asset-based model

- Recognizes young people as leaders and change makers, with an inherent ability to make healthy choices
- Identifies the culture and communities of its youth as assets
- Prompts educators and service providers to equip themselves to draw from the knowledge that their young people bring with them, acquired from their family, cultural traditions, the streets, youth culture, the media, etc.
Structural Change

A new or modified practice, program, or policy that can be sustained over time and is logically linkable to preventing negative health outcomes.

All structural changes are sustainable, even when the initial champions are no longer involved.
Karina is 16 years old and is a new mom. She dropped out of high school last year at the end of the semester. She would often get into trouble at school because of her inability to comply with dress code guidelines. She and her peers are expected to wear a uniform to school, which includes khaki pants and a white shirt. Karina was not able to find khaki pants to fit her growing pregnant body. She said she only had one pair of overalls and some other pants that fit her and she would wash them several times a week in order to meet the school’s expectations. However, as her pregnancy advanced, these weren’t fitting her anymore and she went to speak with her counselor. Karina asserts that when she told the counselor, her response was “I don’t care, just wash that thing over and over.” Then the counselor told Karina that she was going to be sent to another school anyway because the school would not be able to provide childcare after the pregnancy. After this, Karina dropped out because she did not want to deal with the problems she was causing at her school.
Exercise

Apply asset-based concepts to (re)frame the narratives about young people
How does this translate to how we share our stories with stakeholders?
Thank You!

Mayra Serna
mserna@chla.usc.edu

Sam Sunshine
ssunshine@chla.usc.edu

SYPP Center
www.chla.org/sypp