



# Health Access for Teens: From Pregnancy to Grief

## INTRODUCTION

The door of Melany Tarr's office opens and a nurse announces, "I have three kids for you to see. It's been one of those mornings."

Tarr is clinical counselor at Lakeside High School in Wilmington, N.C., an alternative school surrounded by public housing projects. On this Wednesday early in the school year, Tarr definitely has her work cut out for her.

One student just discovered she is pregnant; another lost a close relative in a traffic accident the night before; a third is suffering from the recent death of her mother.

Pregnancy, depression, abuse, fights, learning disabilities—Tarr and her colleagues at the Lakeside High School Wellness Center see it all as they help young people deal with the physical and psychosocial difficulties of life at home and school.

The Wellness Center—a source of more comprehensive services than available at the typical school nurse's office—is a satellite operation of [Wilmington Health Access for Teens](#), a nonprofit health facility for youth that opened in 1997 with the help of a *Robert Wood Johnson Foundation Local Funding Partnerships* grant.

For this long-running RWJF grants program, there is no such thing as an average project. The range of supported missions and services is too broad for there to be a norm. But the story of Wilmington Health Access for Teens offers insight into how a community can use *Local Funding Partnerships* to turn an idea into reality.

## THE PROJECT

### Genesis: Identifying a Local Need

In Wilmington, it all started with a mother whose young son had a learning problem severe enough to make schoolwork and home life difficult but subtle enough to make diagnosis elusive.

The problem surfaced in elementary school, and it wasn't until their child was in middle school that the family found a specialist who understood the cause and how to treat it.

"It took us a long time; it was a struggle, and it was not fun," says the mother, Constance Parker. Happily, her son went on to complete his education with a master's degree in environmental education. The experience nevertheless opened Parker's eyes to the difficulty that some young people face.

Her family, Parker realized, was well equipped to deal with its challenge. Her husband is a neurosurgeon, and Parker, a registered nurse by training, had extensive leadership experience in nonprofit organizations, including presidency of the 3,000-member North Carolina Medical Society Auxiliary. In short, the couple knew the ropes—of the health care world and life generally.

But what about families less fortunate? Her son, she says, could easily have become a school dropout had he not gotten help. What happens to kids without his family's resources? It was a question Parker could not answer—nor leave alone.

### **Moving the Idea toward Reality**

Parker became increasingly convinced of the need for a facility to provide health care and health promotion services to Wilmington's underserved adolescents and their families—and to do it in a convenient, welcoming setting.

She found that a local high school athletic director shared the same vision, and the two of them brought a hospital executive and an assistant school superintendent into their discussions.

From that small group, the idea spread to other community leaders, and in 1994 a steering committee formed to make plans and pursue funding. The Wilmington-area United Way provided temporary seed money for the effort.

### **RWJF Local Funding Partnerships Gets Involved**

To draw interest to its *Local Funding Partnerships* program, RWJF annually disseminates a *Call for Proposals* throughout the philanthropic community. From that or other program information, the United Way staff in Wilmington knew of the program and suggested it to Parker as a possible source of support for her initiative.

Parker's reaction: "Oh, sure, RWJF. We're just a little organization. They're not going to pay any attention to us."

Nevertheless she telephoned the program office in Princeton, N.J. and talked to then-deputy director Orrin T. Hardgrove, who explained the program and expressed interest in Parker's health center plan. (Hardgrove has since retired from the program staff.)

The result was that Parker's group submitted a short concept paper outlining the proposed project—the first step in the annual selection process for new *Local Funding Partnerships* grantees.

### ***The Site Visit***

The project made the first cut, earning Parker and her colleagues an invitation to submit a full proposal. The long-version also got high marks, and the program's National Advisory Committee selected Wilmington for a site visit—the final stage in the selection process.

Parker and her colleagues carefully choreographed a day of activities for their two site visitors: Pauline Seitz, director of the program, and George Penick, at the time an advisory committee member and president of the [Foundation for the Mid South](#). (Penick is now director of the [RAND Gulf States Policy Institute](#).)

First there was breakfast at a local bank attended by the mayor, county officials and state legislators. Parker then moved the team to the local hospital for a meeting with leaders of the medical community followed by lunch at the local health department.

During the day, Seitz and Penick heard from a racially, politically and occupationally diverse group of influential Wilmington residents about the need for a centrally located health center to serve the area's rapidly growing teen population. Beforehand, Parker had prepped each of the local speakers with information on the project.

At the end of the visit, she sensed that Seitz and Penick were impressed with the project's broad support, strong leadership and comprehensive planning. Indeed, they were, but nevertheless the two visitors had concerns about the project's long-term sustainability.

Penick noted that the lead and largest "local" funder was in fact an out-of-town philanthropy, the Duke Endowment. (The Duke Endowment, based in Charlotte, N.C., makes grants throughout the Carolinas.)

On the other hand, he and Seitz also were aware that Parker's group planned to charge service fees on a sliding scale and seek third-party reimbursement for services—steps that the two visitors applauded.

In the end, Seitz and Penick recommended funding of the project, and in June 1996 RWJF awarded Parker's group—Wilmington Health Access for Teens—a \$455,374 grant.

### ***The Value of the Local Funding Partnerships's support***

Had there been no *Local Funding Partnerships* program, the Wilmington community would have developed the health center anyway—but more slowly and with greater

difficulty, says Parker, who became executive director of Wilmington Health Access for Teens. (She held that post until stepping down in October 2007.)

The RWJF grant gave her fledgling organization the financial freedom to concentrate on program implementation, additional fund raising and service expansion, she says.

Also, RWJF's support increased the credibility of the undertaking, making it easier to attract additional funding from other sources, according to Parker. "We would not have been able to be what we are [today] without RWJF. No way," she says.

In addition to opening the satellite Wellness Center at Lakeside High in 1999 (a step taken with state funds), Wilmington Health Access for Teens in 2002 completed a major expansion of its central health facility, almost tripling the square footage.

The staff grew as well—to 24 as of 2005—and patient visits increased to more than 10,000 a year. The organization also opened a second Wellness Center, this one at New Hanover High School in downtown Wilmington, with funding from the Duke Endowment.

## PROJECT IMPACT

As Parker had hoped when she initiated this project, Wilmington Health Access for Teens has had a positive impact on the community's youth and their families.

Here is one example:

A Lakeside High student with family problems was withdrawn and full of anger that found its outlet in verbal assaults at school. Through the school's Wellness Center, the young lady began receiving regular counseling, including instruction in anger management.

At first she was scared and anxious, and building trust was a slow process, says Tarr, the counselor. But two years later, as the student began her senior year, she felt and acted like a new person. "Amazing," Tarr calls the transformation.

*"I'm not shy anymore; [it is] like coming out of a shell," the 16-year-old said in an interview, adding that she now knows what to say and not say to people and how to ignore comments that make her mad.*

Even so, she continues to visit Tarr's office. "I even come when there's nothing wrong, just to talk—stuff I wouldn't talk to a teacher about."

## FUNDING

RWJF provided a \$455,374 grant that ran from July 1, 1996 to June 30, 1999.

## SUSTAINING THE PROJECT

Wilmington Health Access for Teens obtains reimbursement for its services. The majority of patients have coverage through private insurance, Medicaid or the state/federal coverage program for low-income children (Children's Health Insurance Program or CHIP).

About a fourth—mainly young adults working low-wage jobs without benefits—have no coverage of any kind. Although the center never turns anyone away, Parker says it makes an effort to get the uninsured to pay something, even a nominal amount.

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**Prepared by:** Michael H. Brown

Reviewed by: Mary Nakashian and Molly McKaughan

Program Officer: Jane Isaacs Lowe

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