CDC Efforts to Address HIV/AIDS and Youth

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CDC Efforts to Address HIV/AIDS among Youth

• Youth: adolescents/young adults (≤ 24)
• Focus areas
  – HIV/AIDS
  – STDs
  – Sexual Health
• Divisions/Center
  – Division of Adolescent and School Health
  – Division of HIV/AIDS Prevention
  – Division of STD Prevention
  – NCHHSTP Sexual Health Initiative
DASH Activities to Address Youth

- **Indicators:** Monitor sexual health risk behaviors and school policies and practices to address them

- **Research:** Conduct behavioral research to help provide the science base for effective policies and programs

- **Guidance:** Provide evidence-based guidance for adolescent and school health programs to prevent HIV/STDs/teen pregnancy

- **Program Support:** Provide funding and technical assistance to state, local, territorial, and tribal agencies and NGOs to support delivery of effective HIV/STD/teen pregnancy prevention programs
DASH: Key Indicators

- **YRBSS:** % of high school students who
  - Abstained from sexual intercourse or used condoms if sexually active
  - Used both a condom and a hormonal contraceptive during last sexual intercourse
  - Were taught in school about HIV/AIDS

- **School Health Policies and Practices Study (SHPPS)/Profiles:** regarding HIV/STD/pregnancy prevention, % of schools that
  - Addressed key topics on prevention
  - Provided professional development for lead health educators
  - Educated families
  - Linked students for clinical preventive services
  - Had gay-straight alliances
YRBSS Sites* Asking Questions on Sexual Minority Status, by Year

* With weighted data
Health of LGB Youth

- Data from 7 states and 6 cities
- First population-based data on health risk behavior of sexual minority youth
- Increased health risk behaviors (injury, violence, suicide, tobacco, alcohol/drugs, sexual behavior, diet, physical activity)
- Released June 6 at Dept Education LGBT Youth Summit
DASH Guidance for School Health Education

- **CDC School Health Guidelines to Prevent HIV, Other STDs, and Pregnancy and to Promote SH**
  - Updated version to be released Jan 2012
  - Part of a coordinated school health framework
  - Items to assess school policies/practices relate to SH to be added to CDC’s School Health Index

- **Health Education Curriculum Analysis Tool (HECAT)**
  - Conduct clear, complete and consistent analyses of health education curricula
  - Based on
    - National Health Education Standards
    - CDC’s Characteristics of Effective Health Education Curricula
  - Select or develop appropriate and effective curricula
  - Customizable to meet local needs and requirements
DASH: Programmatic Activities

• Support for HIV prevention education in 49 SEAs, 16 LEAs
  – Build capacity of schools and other institutions to promote sexual health among youth
  – Foster the delivery of high-quality, evidence-based sexual health education
  – Increase youth access to contraceptives and sexual health services
  – Establish supportive environments for LGBT youth
  – Enhance youth resilience through positive youth development and family education

• National NGO funding to support programs in areas with highest HIV/STD/teen pregnancy burden
  – 13 NGOs to be funded 2011-16
DASH: Challenges and Possible Responses

- Decentralized education system with widely differing policies and programs makes dissemination of standards difficult.
- Increasing focus on test results diminishes other aspects of school mission, such as protecting and promoting health.
- Funding for school health programs fragmented and inadequate.
  - Most funding categorical, despite evidence that many health outcomes can be prevented by common protective factors.
- Gap between need to implement evidence-based interventions with fidelity & program capacity.
  - Better understanding needed regarding steps and capacity necessary to implement interventions, which parts must be standard and which parts can be tailored to local needs.
- Need to balance ensuring that all students are educated about HIV/STD and targeting high-risk adolescents.
DHAP Activities to Address Youth

• In alignment with NHAS, DHAP focuses on reducing racial/ethnic disparities and on populations most at risk, such as MSM
  – Youth are important in both, but not focused on as a primary target
  – Overall, most “youth-focused” programs are conducted by DASH

• DHAP-specific youth-focused activities
  – Testing events by health depts and CBOs
  – YMSM of Color and YTG of Color FOA (PS 11-1113)
  – Youth-focused communications projects
  – Youth-focused interventions
**DHAP: YMSM of Color and YTG of Color FOA**

- 5 yr program emphasizing testing, linkage, & re-engagement in care/prevention
- $55 m over 5 yrs to 34 CBOs
  - Average award $300,000
  - 19 states and Puerto Rico
  - 30 CBOs focused on young gay/bisexual men, 6 on transgender youth

- Goals
  - Provide HIV testing to > 90,000
  - Identify and link 3500 new HIV+ to care and prevention
  - Deliver behavioral change HIV prevention & condom distribution programs for high-risk HIV-
DSTDP Activities to Address Youth

• Youth a primary focus of division efforts
  – Nearly 50% of STD estimated to occur in youth
• Priority activities
  – Chlamydia screening, rescreening
  – Expedited Partner Therapy
  – HPV vaccine implementation, monitoring
  – Bacterial STI in young MSM
  – Behavioral interventions
    • Intervention research/translation—Project CONNECT
    • Social marketing—Get Yourself Tested (GYT)
What Percentage of CDC HIV Prevention Resources is Being Targeted for Youth?

• DASH: 100%

• DHAP: no precise data
  – 20% reported HIV cases in 2009 in youth

• DSTDP: no precise data
  – estimated > 18% (funds for Infertility Prevention Project for CT screening of young F)
  – 72% reported CT cases in 2009 in youth
CDC Sexual Health Initiative: Consultation
April 2010

• Strong endorsement by attendees: SH framework is broad, contextual, positive, inclusive, empowering
• Opportunity to communicate, normalize and destigmatize SH, leverage partners, synergize (with other “health” approaches)
• Key recommendations
  – Develop a CDC definition of sexual health and a White Paper
  – Develop key objectives & national SH indicators
  – Communications research to find right metaphors, tone, message for greatest acceptance
  – Consider a national coalition of partners to include faith-based organizations
  – Work with programs and providers to determine how a SH framework can enhance their work
Why Does the U.S. Need A Sexual Health Focus to Enhance Public Health Efforts?

• Focus shifts from a disease-focus to a more positive health-based approach characterized by understanding of complex factors that shape human sexual behavior
  – Reduces stigma
  – Relevant to those seeking health (ie, everyone)

• Helps enhance the efficiency and effectiveness of prevention messaging and services by bundling messages and services
  – Effectiveness (eg, platforms for “Childhood immunizations, “Heart health”, physical fitness, etc.)

• Enhances ability to normalize conversations regarding contributions of sexuality and sexual behavior to overall health
Sexual Health Framework: Using health promotion to complement disease control and prevention
CDC Efforts to Address Sexual Health

- Policy
  - CHAC SH WG
  - New definition and indicators for SH
  - White paper: “A Public Health Approach for Advancing Sexual Health in the U.S.”
- Science-based
  - Reviews of intervention evidence, transnational approaches
  - Assessing of communication framework, messages
- Partnerships
  - National Coalition to Enhance STD/HIV Prevention through Promotion of a Holistic Approach to Health and Wellness to be awarded 9/30/11
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Percentage of High Schools in Which Teachers Taught Specific Human Sexuality and HIV Prevention Topics,* 2000 and 2006

*In at least 1 required course.
School Health Policies and Programs Study, 2000 and 2006
Percentage of Secondary Schools With a Gay/Straight Alliance or Similar Club

12% - 16%
17% - 20%
21% - 30%
31% - 49%

No Data

School Health Profiles, 2008
Percentage of Schools* That Provided HIV Counseling, Testing, and Referral Services, by Provider Type, 2000 and 2006

Middle and high schools only.
School Health Policies and Programs Study
Youth Risk Behavior Surveillance System (YRBS)

• Biannual survey of 9th-12th grade HS students
  – Started 1991
  – Current participation: 76 sites (47 states, 23 cities, 6 tribal/territory)
• Risk behaviors assessed
  – Contribute to injuries/violence
  – Tobacco
  – Alcohol, drugs
  – Diet
  – Physical activity
  – Sexual activity

- Ever had sex
- Had sex before age 13
- Had sex with >4 or more persons
- Currently sexually active
- Condom use
- Contraceptive use
- Use of alcohol or other drugs before last sex
Surveillance of School Policies and Practices

• School Health Policies and Practices Study (SHPPS)
  – National survey of school health policies & practices at state, district, school, and classroom levels
  – Provides national level data
  – Conducted every 6 years (1994-2012)
  – As of 2014, more targeted survey every other yr
• School Health Profiles
  – Biannual survey of state, territorial, tribal, large cities
  – Provides state and local-level data
DSTDP: Priority Challenges

- Increasing adherence to screening recommendations in the private sector
  - Public and provider education
  - Working with health plans to promote uptake of USPSTF recommendations
- Improving and assuring confidential access to STD services for youth
  - Legal policy analysis of laws on consent, confidentiality
- Increasing utilization of EPT to prevent re-infection and ongoing transmission
  - Addressing barriers such as state laws prohibiting EPT and policies preventing reimbursement
CDC HIV/STD Prevention: Youth Engagement in Planning and Implementation

- Social marketing, health communication research
  - Youth advocates work with partners (ie, Planned Parenthood) to provide input on GYT campaign.
  - Youth surveyed as part of NCHHSTP Sexual Health message assessment process
- Direct engagement by funded partners
  - LA holds annual leadership conference for youth with emphasis on developing leadership skills to expand GSA in high schools across LA Unified School District
  - South Dakota and several other states work with Straight Forward, a local teen advocacy group on increased awareness and communication between teens and parents.
  - Vermont conducts youth focus groups to provide input into curricula training for professional development events.
DHAP: Youth-Focused HIV Prevention
Communications Projects & Interventions

• Communications projects
  – Act Against AIDS Leadership Initiative
    • 9 of 19 grantees have youth-focused programs
  – Take Charge. Take the Test.
    • Campaign to promote HIV testing in AfAm F 18-34 yrs old
  – Testing Makes Us Stronger
    • Campaign to promote HIV testing among black gay and other MSM
    • Not exclusive for youth, but those 18-24 are primary audience
  – Greater Than AIDS
    • CDC-supported Kaiser Family Foundation campaign targeting most-heavily affected communities via media partners (eg, MTV) and community outreach

• Interventions
  – Project AIM (reduce HIV risk behaviors at-risk youth)
  – Choosing Life: Empowerment! Action! Results! (for those > 16 living with HIV or at high risk)
  – Focus on Youth (for AfAm youth 12-15)
CDC Definition of Sexual Health: A Public Health Perspective

- Sexual health is a state of wellbeing in relation to sexuality across the lifespan that involves physical, emotional, mental, social, and spiritual dimensions.

- Sexual health is an inextricable element of human health and is based on a positive, equitable, and respectful approach to sexuality, relationships, and reproduction, that is free of coercion, fear, discrimination, stigma, shame, and violence.

- It includes the ability to understand the benefits, risks, and responsibilities of sexual behavior; the prevention of disease and other adverse outcomes; and the possibility of fulfilling sexual relationships.

- Sexual health is impacted by socioeconomic and cultural contexts—including policies, practices, and services—that support healthy outcomes for individuals and their communities.

Developed by the Sexual Health Workgroup of the CDC-HRSA Advisory Committee. 2011
Objectives of CDC’s public health approach to advancing sexual health in the U.S.

I. Increase knowledge, communication, and respectful attitudes regarding sexual health

II. Increase use of high-quality, coordinated educational, clinical, and other preventive services that improve sexual health

III. Increase healthy, responsible, and respectful sexual behaviors and relationships

IV. Decrease adverse health outcomes, including HIV/STDs, viral hepatitis, unintended pregnancies, and sexual violence
DASH: Engagement of youth in planning and implementation

• Youth not directly involved by DASH in planning, however funded partners engage youth in both planning and implementation.

• Examples
  – LA holds annual leadership conference for youth with emphasis on developing leadership skills to expand GSA in high schools across LA Unified School District
  – South Dakota and several other states work with Straight Forward, a local teen advocacy group on increased awareness and communication between teens and parents.
  • Tell It To Me Straight community dinner for parents of MS and HS-aged students encourages parents to engage children in conversations on teenage sexuality, other safety concerns
  – Broward County Public Schools partnered with American Red Cross to develop and implement an HIV/AIDS education program for HS students—Project BEAT (Bridging Education and Attitudes in Teens).
  – Vermont conducts focus groups with youth to incorporate student input into curricula training professional development events.
DSTDP engagement of youth in planning and implementation

- DSTDP conducts social marketing research with youth to inform our communication activities
- Youth advocates work with our partner Planned Parenthood Federation of America to provide input on the GYT campaign.