



# Adolescents

This initiative is sponsored by The Health Foundation of Greater Indianapolis. It is implemented by The State Department of Health in collaboration with Health Care Education and Training (HCET), The Health Foundation of Greater Indianapolis, BU Wellness Network, Midwest AIDS Education and Training, and Lifesmart Youth.



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## Initiative Overview

According to the 2017 Census Bureau population estimates, approximately 13% of the Indiana population is made up of people ages 16 to 24. Racially, Indiana is 85.0% White and Non-Hispanic, 9.7% Black/African American, and the rest is comprised of Asian/Pacific Islander or American Indian/Alaska Natives. The Indiana population is largely Non-Hispanic (93.0%), with Hispanic minority of 7.0%. Despite the relatively small portion of the Indiana population made up of people ages 16 to 24, that age group experiences a high burden of HIV/STD diagnoses and poor overall HIV/STD health outcomes.

In 2019 there were 549 people diagnosed with HIV in Indiana. Black individuals made up 64.8% of the 2019 new diagnoses, in comparison with White 20%, Hispanic 12.4%, Asian 1%, Other 2%. People ages 16 to 24 accounted for 19% of the 549 new HIV diagnoses in 2019. When 2019 new HIV diagnoses among people aged 16 to 24 are broken down by risk factor, men who have sex with men (MSM) account for 50.5% of the cases. Other risk factors identified were heterosexual contact 16.2%, injection drug use (IDU) 2%, IDU+heterosexual contact 1%, MSM+heterosexual contact 12.4%, MSM+IDU 2%, other/no risk identified 15.2%. Geographically, the HIV prevalence rate among people ages 16 to 24 is highest in Marion County, while Lake, Allen, St. Joseph, and Vanderburgh counties also have high prevalence rates.

The disproportionate impact of STDs on people ages 16 to 24 is even more pronounced than that of HIV. In 2019, 35,985 people were diagnosed with chlamydia in Indiana. Of those chlamydia diagnoses, 70% were in people under the age of 25 years old. There were 12,069 gonorrhea diagnoses in 2019, and 47% of them were in people under the age of 25.

It is crucial for HIV/STD prevention and treatment providers to pay special attention to people ages 16 to 24. Fast detection and immediate treatment of HIV/STDs will lead to less transmission and better health outcomes for the affected individuals. For people living with HIV, treatment is ongoing, and the ideal outcome is to help them achieve a suppressed HIV viral load by consistently taking anti-retroviral medications. Unfortunately, only 52% of PLWH between the ages of 16 and 24 have achieved a suppressed HIV viral load in the state of Indiana. For comparison, PLWH ages 25 and older have a viral load suppression rate of 62%.

## Purpose

The CHII: Adolescents is a 13-month initiative that brings together HIV/STD treatment and prevention organizations, as well as other community-based organizations that serve adolescents, in an effort to reduce HIV disparities experienced by adolescents. Learning will take place in the form of teaching conducted by subject matter experts, engaging activities planned by the learning initiative faculty to reinforce learning, and assistance with planning the implementation of applying best practices identified during the initiative.

## Aim

The aim of the CHII: Adolescents is to reduce HIV and STD-related disparities experienced by adolescents in Indiana to end the HIV epidemic.

## HRSA Key Strategies to End the Epidemic

The efforts will focus on four key strategies that together can end the HIV epidemic in the U.S.

1. **Diagnose** all people living with HIV as early as possible after transmission.
2. **Treat** HIV rapidly and effectively to achieve sustained viral suppression.
3. **Prevent** HIV transmission among people at highest risk with Pre-Exposure Prophylaxis (PrEP) and prevention education.
4. **Respond** rapidly to detect and respond to HIV clusters and prevent new HIV infections.

## Goals

CHII: Adolescents is driven by the above mentioned overarching aim and is tied to four subsequent goals:

1. Increase efficacy of providers to deliver comprehensive sexual health services to adolescents, including services that are culturally and age-appropriate
2. Engage and retain adolescents in HIV/STD/VH services/prevention
3. Employ evidence-based practices for adolescents in Indiana
4. Increase collaboration among providers statewide to improve service delivery for adolescents

## Participants

The initiative seeks to engage HIV and STD care and treatment centers, as well as community-based organizations who work with adolescents living with HIV or at high risk of acquiring HIV/STDs. Participants should have a role at their agency that influences the services being delivered to adolescents. A range of activities will be offered to support participating agencies, including webinars and coaching sessions.

## Expectations

- Submit a letter of commitment signed by the organization's executive director that names the team of individuals at the organization who will participate in the initiative and provide their contact information.
- Commit to the overall aim of the learning initiative.
- Have active participation in all learning opportunities.
- Be willing to deploy learned information and apply it to serve the needs of adolescents in your community.
- Complete a capstone project aimed at improving the services delivered to adolescents.
- Present the results of your capstone project to the participants of CHII at the end of the initiative.
- Engage in learning initiative communication.

## **Benefits of Participation**

The benefits of this initiative for participants, agencies and the clients served include:

- Opportunity to learn about ways to decrease HIV and STD related health disparities in your community
- Being part of exciting growth and change processes directly impacting Indiana HIV and STD services
- Increase the impact of funding spent on services
- Networking opportunities with organizations who serve similar communities and populations
- Opportunities to learn from subject-matter experts
- Hands-on learning and sharing of best practices during webinars
- Opportunity to stand out among adolescent-serving organizations in Indiana
- Extensive networking and peer engagement on multiple levels beyond training

## Initiative Activities

### Structure

The structure and timeline of CHII loosely follows The Institute for Healthcare Improvement Breakthrough Series, which involves cycles of group learning across participating teams and within individual teams testing change ideas in their home organizations. Figure 1 below illustrates the timeline of events in the CHII cycle. Participants will receive coaching, encouragement, and support needed to make incremental changes at their organizations throughout the initiative to best serve people ages 16 to 24 in their regions.

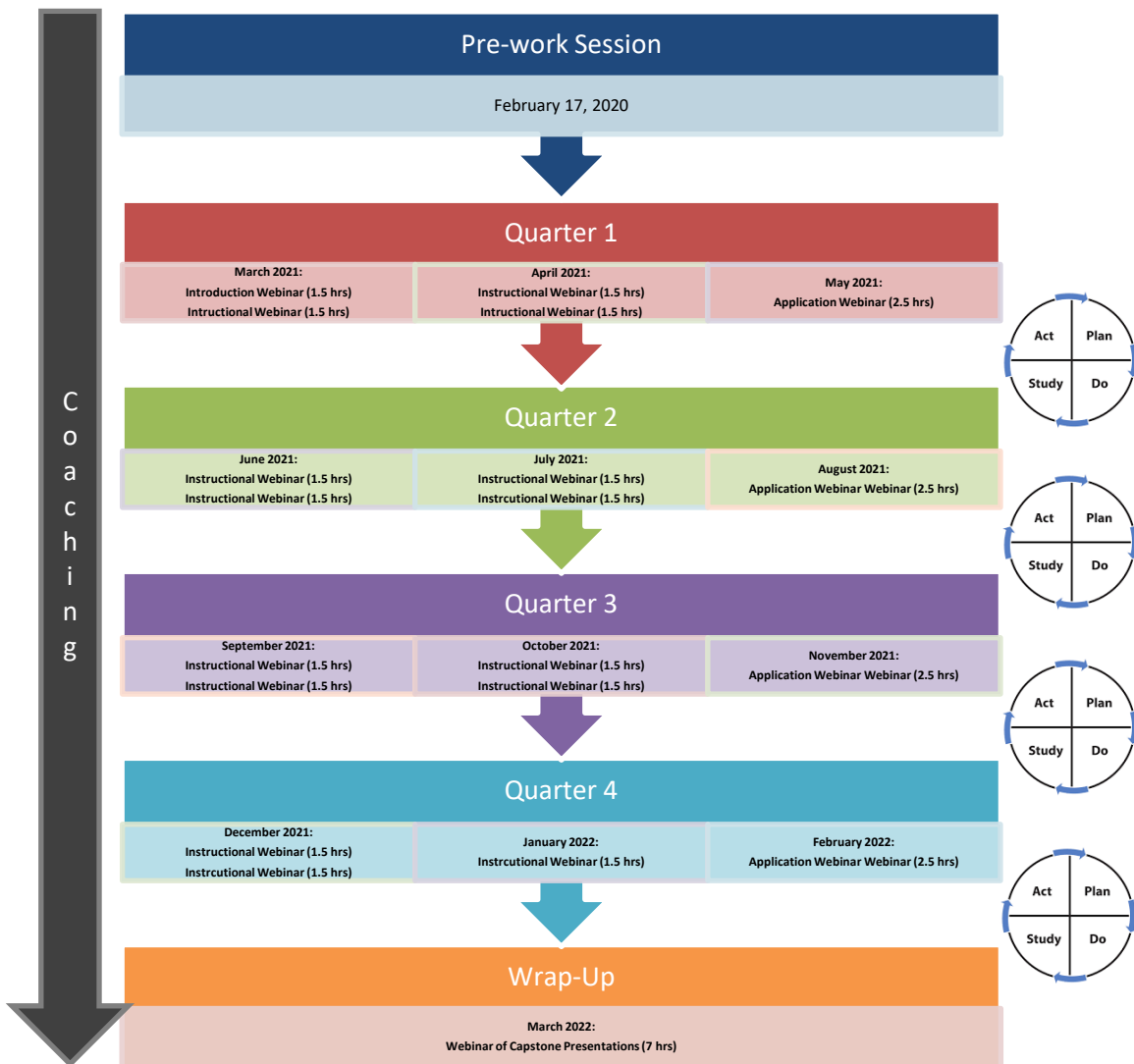


Figure 1

## Instructional Webinars

Instructional webinars are an opportunity to learn from subject matter experts about topics that align with the overall aim and subsequent goals and objectives for CHII. These webinars will facilitate a transfer of valuable knowledge that participants will use to deliver more effective services for people ages 16 to 24.

## Recap and Engagement Webinars

Recap and engagement webinars will occur at the end of each quarter. A portion of these webinars will be dedicated to additional review and processing of information provided in the instructional webinars. These webinars will also be used for large and small group discussions, networking, coaching, and quality improvement planning.

## Coaching

Each site will be assigned a practice facilitation coach. Coaches are trained in building organizational capacity for change and supporting meaningful quality improvement in diverse agencies. The coach's focus is on system changes necessary to support implementation and sustainability of programming for people ages 16 to 24. Coaches will have frequent contact with the sites providing a strengths-based approach to capacity building that develops their core competencies and addresses areas for improvement. Participants will each be assigned an expert coach to use as a sounding board and a source of guidance. Initial interactions between coaches and participants will include a review of current program efforts, hopes and fears for agency change, and the establishment of goals to best serve people ages 16 to 24.

## Capstone Projects

**Each participating organization is expected to apply their learning through a capstone project.** Capstone projects should be planned, implemented, and evaluated using quality improvement methodology. Organizations should utilize their coaches for technical assistance with planning and implementing their capstone projects. At the end of CHII, each participating organization will give a short presentation about their capstone project to the entire group.