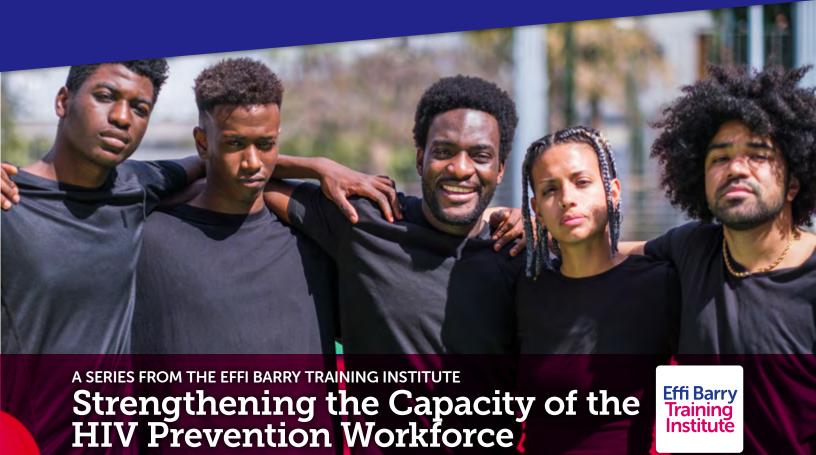
A SERIES FROM THE EFFI BARRY TRAINING INSTITUTE

**Effi Barry** 





Increasing HIV
Knowledge Among Youth
by Engaging the HIV
Prevention Workforce



### **About This Series**

The Effi Barry Training Institute (EBTI), led by HealthHIV, equips HIV service providers, community organizations, and public health professionals in DC with the tools to advance equitable HIV prevention and care. Through capacity building assistance, the EBTI provides resources to support program implementation, workforce development, and community engagement.

The "Strengthening the Capacity of the HIV Prevention Workforce" series addresses topics such as:

- ► Removing barriers to care
- ► Implementing trauma-informed policies, reentry support, and community-driven interventions
- ► Recruiting, training, and retaining peer workers
- ► Engaging young people (ages 13-24) in HIV prevention efforts

The Series includes these resource materials:

- Applying Status Neutral Approaches to End the HIV Epidemic in DC
- 2. Key Strategies and Community-Driven Approaches to Addressing Incarceration, HIV, and Black Women in DC
- 3. Recruiting and Retaining Peers
- 4. Increasing HIV Knowledge Among Youth by Engaging the HIV Prevention Workforce

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### A How-To to Know YOUth



HIV remains a critical public health issue, particularly for young people aged 13-24 (Gen Z), who represent a significant proportion of new diagnoses.

Youth face unique barriers to prevention, testing, and linkage to care, rooted in limited access to comprehensive sexual health education and youth-centered healthcare. Disparities are especially strong among young people of color, LGBTQ+ youth, and those in underserved communities. Early detection and linkage to care are crucial, as untreated HIV can lead to serious health complications and higher transmission risks. More importantly, youth engagement and youth-focused education programs are key to changing HIV's impact on Gen Z. However, there exists a huge gap between youth who are vulnerable to HIV and the information and services they need to ensure they remain sexually healthy. Thanks to restrictive policies and the systems that adhere to them, the prevention workforce has limited access to youth and needs a new approach for engagement to effect change and reduce the disparities.

This fact-based guide is intended to strengthen the impact of the HIV prevention workforce in DC by providing strategies to effectively engage with and educate youth ages 13 to 24 about HIV and their health. By engaging youth directly using innovative approaches, individuals working in HIV prevention can positively impact youth and reduce HIV's disproportionate impact on this vulnerable population.

We will begin with a foundational view of the HIV landscape as it pertains to youth. Then, we will discuss the systems and policies that influence youth vulnerability. We will explore ways to engage community partners and work collaboratively to bridge the knowledge gap of youth. We will challenge the prevention workforce to innovatively educate youth through a framework that is for, to, and by youth. Finally, we will share resources to assist the workforce in further developing skills to maintain relevance and impact among the target population.

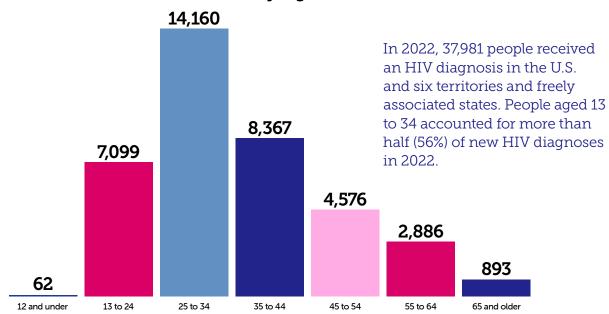
Once complete, YOU, the reader, will have the **KNOW**ledge necessary to be able to say **Y**es to **O**pportunities for **U**nderstanding youth and how best to help them stay sexually healthy.

# Youth and HIV Vulnerability

Young people aged 13-24 compose a growing share of new HIV diagnoses, underscoring critical disparities in prevention efforts. HIV testing among youth is critically low, resulting in individuals remaining unaware of their status due to limited engagement with testing services.

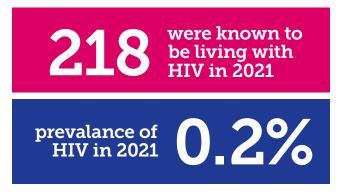
- ▶ Nearly half of all youth living with HIV are unaware of their status, presenting a significant barrier to addressing the epidemic.<sup>1, 2</sup>
- ▶ Among U.S. high school students surveyed in 2023, 7% of all students have ever been tested for HIV.<sup>3</sup>
- ► In 2022, 20% of new HIV diagnoses occurred in this age group, despite representing a smaller segment of the overall population.<sup>4</sup>
- ► Among youth living with HIV, 80% accessed some form of care, but only 66% achieved viral suppression.<sup>1, 5</sup>

### HIV Diagnoses in the U.S. and Six Territories and Freely Associated States By Age, 2022



The Annual HIV, Hepatitis, Sexually Transmitted Infections (STIs), and Tuberculosis (TB) Surveillance Report in Washington, D.C. shows the District continues to experience complex epidemics, especially among the young population.

Among young people living with HIV in DC, those ages 13-19 and 20-24 had low viral suppression rates in 2021 at 44.4% and 51.3%, respectively.6 Of youth aged 13-24 in DC...



### Of those newly diagnosed with HIV in DC in 2021...

3 in 4 were Black

2 in 3
were men who
have sex with men

1 in 5 were aged 17–19

9 in 10 were male

According to the 2021 District of Columbia Youth Risk Behavior Survey:

- ▶ Since 2007, condom use has declined by over 25 percentage points among middle school students and 18 percentage points among high school students.
- ▶ Among students who had ever had sexual contact, high school LGBTQ+ students were 34% less likely to use a condom the last time they had sex than heterosexual students.
- ► The number of twelfth graders who have ever had sex is down by nearly one-third since 2019. Notably, however, the percentage of twelfth graders who have ever tested for HIV declined by almost half between 2019 and 2021, from 45.1% to 24.4%.
- ► Female high school students reported having sexual contact with the same sex or both sexes at over four times the rate of their male counterparts.

# Systemic Influences Widen the Gap between Youth and Critical Prevention Services

Knowledge and service gaps occur when policies and systems do not align with the needs of vulnerable youth. Middle and high school students spend a quarter of their weekdays in school, yet, due to existing policies, have little to no access to medically accurate information and services that could optimize their health and enable them to make sound choices towards remaining sexually healthy. Table 1 provides a brief snapshot of key factors found in state health education laws in the DMV area.

Table 1: Comparison of relevant state health education laws<sup>7, 8, 9</sup>

	Washington, DC	Maryland	Virginia
Parent/guardian opt-out	Required	Required	Required
Abstinence as a topic of instruction	Not addressed	Not addressed	Required
Sexual health education component	Required	Required	Permitted
Curriculum is medically accurate	Not addressed	Not addressed	Not addressed
Curriculum includes instruction on strategies and skills	Required	Not addressed	Not addressed

Systemic policies significantly impact HIV prevention and education for youth. Some policy requirements like abstinence-only, abstinence-based, and parental opt-out requirements, restrict access to comprehensive sexual health education. This can be problematic as parents/guardians may not be fully aware of the content and, out of an abundance of caution, may prevent a sexually active teen from acquiring the knowledge to make sound decisions regarding their sexual health. Legal vagueness created by not explicitly addressing necessary components of health education, as seen in red in the above table, also plays a role as youth may receive incomplete or inaccurate information adding to confusion, ignorance, and vulnerability to HIV.

School systems are also impacted by policies impacting responsiveness to the health and wellness needs of youth. Policies may limit access to essential HIV prevention resources for youth such as on-site health services, distribution of condoms and education on their proper use, HIV/STI counseling and/or testing, age-appropriate counseling on factors that contribute to HIV vulnerability such as sexual abuse, coercion, and human trafficking, or linkage to care to external healthcare facilities

Publicly funded organizations and programs that traditionally have access to youth such as Boys and Girls Clubs, after-school programs, and others are often equally limited in their involvement in the provision of sex education as funders generally require alignment with the same systemic policies as educational systems leaving youth at a loss with regards to sound education and access to reliable resources for ensuring their sexual health.

## Collaboration Can Begin to Bridge the Gap through Community Engagement Strategies

Effective engagement of youth begins with changing policies and systems. This requires a collaborative approach, involving a partnership between the HIV prevention workforce and healthcare providers, faith groups, and community based organizations serving youth and their families. By combining efforts, policymakers are influenced by the amplified voices of diverse community advocates, enabling the HIV prevention workforce to deliver comprehensive, age-appropriate education and resources to young people.

The prevention workforce should identify local community partners. Community partners already have direct access to youth and their families and can link those with vulnerabilities to the workforce equipped to address them. Table 2 provides a brief list of ways the workforce can engage community partners, such as healthcare providers, faith groups, and community based organizations and programs.

Table 2. Strategies to Engage Community Partners

Community Partners	The HIV Prevention Workforce can:		
Healthcare Providers	► Encourage providers to integrate accurate, age-appropriate HIV prevention information into routine care		
	▶ Promote and provide access to training on current HIV prevention strategies and effective sexual health risk assessments		
	► Encourage the integration of HIV prevention into existing, youth-focused services like administration of the HPV vaccine		
Faith Groups	► Foster partnerships that align with the values of the community		
	► Encourage faith leaders to create safe spaces to empower youth to seek guidance without fear of judgment		
	▶ Educate faith leaders about HIV testing, safe practices, and prevention methods		
	▶ Provide a platform for open conversations, such as community workshops or dialogues		
Community Based Organizations and Programs	▶ Partner with local organizations, health centers, or nonprofits to offer HIV awareness programs, workshops, or campaigns specifically for youth		
	▶ Share materials and resources; make resources available in print and online as well as in languages appropriate to the community		
	► Participate in existing youth-friendly events		
	▶ Promote the DC Department of Health's new resource, LinkU, which helps people in DC find resources about many health-related topics.		

Developing relationships with and engaging community partners as access points to educate youth and their families allows prevention staff to build trust with and make space for youth representation in all aspects of programming. Youth should be included in program development, execution, and continuous evaluation efforts.

# **Engaging Youth through Innovative Education**

Once the partnerships have been made, engaging directly with youth for HIV education, prevention, and linkage to care requires practical strategies that address the unique culture of today's youth. Gen Z relies heavily on technology for much of their knowledge and interactions which influences their decision making. With shorter attention spans, youth will learn best from prevention messaging that is both succinct and meaningful.

To best reach Gen Z, the prevention workforce should ask themselves if they are creating materials for youth that are relevant to them and incorporate their perspective. The following three questions will assist you as you develop innovative educational materials for youth.

- 1. Are you creating educational materials and messaging that are specifically designed <u>for youth?</u>
  Materials should be:
  - Age appropriate
  - Chunked out
  - Aligned with cultural appropriateness
  - Visually appealing
- 2. Are you delivering HIV education that is relevant to youth? Consider methods that extend outside of a traditional classroom setting such as:
  - Storytelling
  - Gamification
  - Podcasts
  - Infographics
  - Short videos
  - > Social Media and Digital Platforms to collaborate with influencers
- 3. Are you regularly assessing the impact of your educational efforts to ensure that they are timely, relevant, and tailored for and <u>by youth</u>? Consider using assessment tools such as:
  - Youth-led focus groups
  - Community advisory groups
  - Key informant interviews

Implementing these strategies engages Gen Z with an empowering HIV message that encourages testing, utilizing diverse HIV prevention methods, and accessing care promptly. As prevention staff elevate their ability to effectively reach youth, collaboration with healthcare providers, faith groups, and community based organizations will create partnerships with youth and their families to reduce youth vulnerability to HIV and foster thriving communities.

# How can HealthHIV and the Effi Barry Training Institute help you KNOW YOUth?

For the HIV prevention workforce to effectively educate youth in DC, they must have the tools, knowledge, and expertise to support their community. HealthHIV leads the Effi Barry Training Institute and the Ryan White Training Center to increase accessibility, availability, and utilization of culturally and linguistically appropriate capacity building assistance including state-of-the-science information, training, and technical assistance including consultation, services, and facilitation of peer-to-peer mentoring for the HIV care and prevention workforce in Washington, DC.

### **Training Library Resources Focusing on Youth**

 Generation Zero: Transformative Strategies to Combat HIV Transmission in Youth

https://effibarryinstitute.org/modules/generation-zero-transformative-strategies-to-reduce-hiv-transmission-in-youth/

▶ Best Practices for Youth: Transition to Care, Cultural Competence & Communication

https://effibarryinstitute.org/modules/best-practices-for-youth-transition-to-care-cultural-competence-communication/

- ► Engaging Youth in HIV Prevention and Care https://effibarryinstitute.org/resources/engaging-youth-in-hivprevention-and-care/
- ► The Intersection of Mental Health and HIV Among Youth https://effibarryinstitute.org/resources/the-intersection-of-mental-health-and-hiv-among-youth/
- Building Bridges: A Multi-Layered Approach to Addressing Sex Education in Faith Communities

https://effibarryinstitute.org/resources/building-bridges-a-multi-layered-approach-to-addressing-sex-education-in-faith-communities/



## **Effi Barry Training Institute Resources**

## The Effi Barry Training Institute offers other valuable resources to help strengthen the HIV Prevention workforce such as:

- ► Training library with live and self-paced webinars, toolkits, and resources
- ► Capacity Connection monthly newsletter
- ► Rooted in Wellness podcast series
- ► Technical assistance

### e-Newsletter

Capacity Connection is a monthly e-Newsletter from the Effi Barry Training Institute (EBTI). This platform provides updates on training opportunities through EBTI and offers valuable information for the HIV prevention community in and around Washington, DC. Each issue of Capacity Connection features local events, key webinars, podcasts, and resources to help build your organization's capacity. Additionally, we shine a spotlight on the impactful work and diverse perspectives of your colleagues throughout the District.



https://effibarryinstitute.org/capacity-connection/

### **Podcasts**

A podcast series dedicated to exploring holistic approaches to health and well-being. Join us as we delve into topics such as trauma, HIV, mental wellness, and the social determinants of health, all to help you cultivate a balanced and thriving life.



https://effibarryinstitute.org/podcast/rooted-in-wellness/



#### **Technical Assistance**

If you prefer a more hands-on, interactive approach, HealthHIV also offers one-on-one capacity building services to support organizations in the Fee-for-Service business process; basic HIV service competencies; advanced skills in health care systems, data and health informatics; high-impact prevention programs, including biomedical; and emerging evidence-based or informed approaches through a series of group-level trainings, boot camps, community forums, and individual consultation.

To request technical assistance directly from HealthHIV's EBTI, beyond the capacity building prescribed by your Program Officer, please submit a Technical Assistance Request form.

https://effibarryinstitute.org/ta-request/

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EffiBarryInstitute.org

The Effi Barry Training Institute, led by HealthHIV, provides training and technical assistance to support current and prospective HAHSTA grantees and community-based organizations. The Institute strengthens the capacity of the HIV care and prevention workforce to optimally plan, implement, and sustain high-impact HIV prevention (HIP) and HIV care interventions and strategies. Capacity building offerings also cover a wide range of content areas including HIV care and treatment, mental health, faith-based community engagement, stigma reduction, trauma-informed care, healthcare access, and more.

Organizations interested in tailored Capacity Building Assistance (CBA) can scan the QR code or visit HealthHIV.salsalabs.org/cba/index.html to submit a request.

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# **HealthHIV**

HealthHIV.org

HealthHIV is a national non-profit organization advancing public health through medical and consumer education, capacity building, health services research, advocacy, and communications. Based in Washington, D.C., HealthHIV offers training and certification programs, technical assistance for healthcare providers and community organizations, and capacity building to address organization sustainability, leadership development, harm reduction, and health equity. To learn more about HealthHIV's capacity building programs, scan the QR code or visit HealthHIV.org.





