DASH

DIVISION OF ADOLESCENT AND SCHOOL HEALTH

THE PATH FORWARD

DASH STRATEGIC PLAN

Centers for Disease Control and Prevention
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention

DIVISION OF ADOLESCENT AND SCHOOL HEALTH

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Centers for Disease Control and Prevention (CDC). *The Path Forward: DASH 2020-2025 Strategic Plan*, Division of Adolescent and School Health. U.S. Department of Health and Human Services, CDC; 2020.

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MESSAGE FROM THE DIRECTOR

On behalf of the Centers for Disease Control and Prevention's Division of Adolescent and School Health (DASH), I am pleased to present our next five-year strategic plan to improve the health of our nation's youth. This plan represents the culmination of a year of reflecting on what we've accomplished, gathering stakeholder input, reviewing best practices, and diving into our data to identify the most impactful things we can do to support adolescents in becoming healthy and successful adults.

Our division priorities remain focused on preventing HIV, STDs, and unintended pregnancy among youth, with an expanded view of the issues that contribute to their risk. However, as the world they are growing up in changes, so must the institutions that support them. For this reason, our new strategic plan expands our approach to address additional pressing health risks and increases our role in responding to them.

The strategic plan includes several imperatives intended to improve the social and emotional wellbeing of adolescents, as those factors are inextricably tied to their physical health and risk for HIV, STDs, and unintended pregnancy. This will require deliberate steps to understand how schools can support improved mental health and reduce high-risk substance use and exposure to violence, be it bullying or in relationships. We are also intentionally exploring the contributions DASH can make to start the path of prevention earlier during the elementary school years. We know we cannot directly reach every student in the nation, but we are committed to extending our efforts by leveraging our world-class science and our expertise in primary prevention to provide more school districts with the tools we know work to support the health of their students.

With most youth enrolled in school, this is an ideal setting for understanding adolescent behaviors and experiences and employing primary prevention strategies. For over 30 years, DASH has served as a leader in developing and promoting data-driven ways to reach students and improve their safety and health. Our unique ability to bridge public health and education provides a well-established platform to support schools with guidance and resources for prevention of HIV, STDs, and unintended pregnancy.

On behalf of the DASH leadership team, I invite you to review the plan and share in our excitement about the future. We look forward to working side by side with our partners and stakeholders to create and strengthen collaborative efforts to improve the health of all youth.

I am eternally grateful for the contributions of DASH staff, partners, and stakeholders in the development of this strategic plan and am looking forward to seeing these ideas in action.

Sincerely,

Kathleen A. Ethier, PhD

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Director
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DASH MISSION

To strengthen schools, families, and communities to prevent HIV, other STDs, and unintended pregnancy and help youth become healthy, successful adults.

DASH VISION

Through this plan, we imagine a future where all youth in the U.S. will be equipped with the knowledge, skills, and resources for a healthy adolescence and adulthood.

THE FOUNDATION OF DASH'S WORK

To maintain high-quality surveillance systems, translate research on what works, support school districts in implementing quality health education, establish the systems that connect students to health and behavioral services, and create safer and more supportive school environments.

EXECUTIVE SUMMARY

Helping schools to help youth and prepare them for their futures is at the center of everything we do. The Division of Adolescent and School Health's (DASH) 2020-2025 strategic plan reinforces our commitment to protect the health of the nation's youth by working in partnership with education agencies, health care organizations, and non-governmental organizations to support schools, families, and communities.

The Centers for Disease Control and Prevention's Division of Adolescent and School Health believes all adolescents deserve a healthy start and to be supported so they can reach adulthood.

Ending the HIV Epidemic

In 2019, the U.S. Department of Health and Human Services (HHS) launched and began implementation of a new initiative—Ending the HIV Epidemic: A Plan for America (EHE)—which aims to reduce new HIV infections in the United States by 90% by 2030. During the first 5 years, the initiative will target resources to the 48 counties with the highest HIV burden; Washington, D.C.; San Juan, Puerto Rico; and 7 states with a substantial rural HIV burden. CDC will fund health departments and community-based organizations to develop and implement proven and innovative activities across all four strategies of the initiative: diagnose, treat, prevent, and respond. Primary prevention for adolescents, particularly prevention programs that include linking youth to health services, is a critical step to ending the HIV epidemic. DASH's programmatic model, with its emphasis on health education and health services, is complementary to the initiative, and the DASH strategic plan identifies approaches and activities that can work to support achieving EHE's goals and create an HIV-free generation.

HOW DASH'S 2020-2025 STRATEGIC PLAN WAS CREATED

In February 2019, DASH began its strategic planning process. The process included

- **8** **Leadership sessions** to develop a roadmap for the future
- **1** **Environmental scan** which included document reviews, conversations with stakeholders to understand their priorities, and an assessment of the previous strategic plan
- **6** **Months** of planning sessions with division staff

This engagement process established the foundation for DASH's 2020-2025 strategic plan, which is both actionable and aspirational. Our vision, mission, goals, and four strategic imperatives are designed to work together to accelerate progress toward improving the health of the nation's youth. The plan is reinforced by measurable objectives and indicators essential for assessing progress.

To optimize the effectiveness of the plan and the potential for success in implementation, DASH will

- **Align** its work internally and externally.
- **Support** federal action plans for improving adolescent health and safety.
- **Take advantage** of opportunities to prepare youth for healthy and successful futures.

We are keenly aware of the role external factors and partners can play in the future directions of accomplishing our aims. This plan allows for DASH to be decisive and driven to achieve specific goals while being flexible and responsive to the external environment.

Looking ahead, we know many opportunities exist to prepare youth for healthy and successful futures.

Evaluation results demonstrate that DASH's approach to school-based prevention is effective at reducing health risk behaviors and experiences associated with HIV, STDs, and unintended pregnancies. The plan continues to build on the progress we have made, and to implement EHE's four strategies. Additionally, the plan includes objectives and activities that connect to accomplish our goals and achieve our vision.

Following are the core elements of our plan, outlined in the 2020-2025 Strategic Framework.

2020-2025 STRATEGIC PLAN

FRAMEWORK

VISION

We envision a future where all youth in the U.S. will be equipped with the knowledge, skills, and resources for a healthy adolescence and adulthood.

MISSION

DASH strengthens schools, families, and communities to prevent HIV, other STDs, and unintended pregnancies and help youth become healthy, successful adults.

GOALS

1. Improve the capacity of schools, families, and communities to help youth become healthy, successful adults.
2. Decrease prevalence of behaviors and experiences that contribute to HIV, STDs, and unintended pregnancy, including priority health issues (i.e. sexual risk behaviors, high-risk substance use, violence victimization, poor mental health, and suicidality).
3. Advance health equity through the reduction of disparities in behaviors and experiences that contribute to HIV, STDs, and unintended pregnancy.
4. Increase the implementation of strategies that promote protective factors that contribute to healthy youth development.

STRATEGIC IMPERATIVE A

Strengthen our programs, surveillance, and research through innovation and continuous quality improvement.

OBJECTIVES

- By 2022, develop a refined program model that provides opportunity for scaling up DASH's reach.
- By 2022, expand extramural partnerships and collaborations to support implementation of the refined program model.
- By 2025, CDC expertise is framing the national discussion on improving adolescent health.
- By 2025, establish a mechanism to hear from youth, parents, and families to inform DASH's strategies.
- By 2025, develop a technical package to strengthen linkages within communities to provide behavioral health, mental health, and healthcare services to adolescents.

STRATEGIC IMPERATIVE B

Integrate priority populations and health issues across program, surveillance, and research.

- By 2021, develop internal DASH roadmap for reducing adolescent health disparities related to race/ethnicity, sexual orientation, gender identity, and geography.
- By 2023, DASH staff have cultivated expertise around priority health issues and disparities.
- By 2023, DASH funding opportunity reflects revised program model and disparities roadmap.
- By 2025, DASH's outward facing products emphasize the health disparities used in the roadmap.

STRATEGIC IMPERATIVE C

Expand reach to school-aged youth.

OBJECTIVES

- By 2025, expand program implementation to reach 15% of middle and high school students.
- By 2025, identify and pilot strategies to effectively reach elementary school students.
- By 2025, increase reach to rural and/or southern communities with priority populations.
- By 2025, establish mechanisms for directly communicating to youth, parents, and families.

STRATEGIC IMPERATIVE D

Strengthen and cultivate organizational excellence.

- By 2022, develop a division-wide workforce plan that articulates staffing goals to achieve DASH's mission.
- By 2022, create a staff professional development program to increase the job-related knowledge and skills of all staff.
- By 2025, establish and maintain an organizational culture and climate that values all employees, practices mutual respect, and supports high performance.

EACH OBJECTIVE IS SUPPORTED BY ACTIVITIES CRITICAL TO THE EXECUTION OF THE PLAN.

2020-2025 STRATEGIC PLAN

Since 1988, the Division of Adolescent and School Health (DASH) has assembled extensive expertise in developing and implementing effective school health programs and leading the CDC's school-based surveillance efforts. Accomplishing DASH's mission requires coordination of efforts across every branch and office in the division, as well as among our internal and external partners and stakeholders, maximizing the resources available to create environments that keep youth safe and healthy and prevent HIV, STDs, and unintended pregnancy. The plan affirms four overarching goals:

OVERARCHING GOALS:

1. Improve the capacity of schools, families, and communities to help youth become healthy, successful adults.
2. Decrease prevalence of behaviors and experiences that contribute to HIV, STDs, and unintended pregnancy, including priority health issues (i.e., sexual risk behaviors, high-risk substance use, violence victimization, poor mental health, and suicidality).
3. Advance health equity through the reduction of disparities in behaviors and experiences that contribute to HIV, STDs, and unintended pregnancy.
4. Increase the implementation of strategies that promote protective factors* that contribute to healthy youth development.

**Protective factors are individual or environmental characteristics, conditions, or behaviors that reduce the effects of stressful life events.*

While DASH continues to act on existing strategies and activities within the division, this plan identifies four new strategic imperatives that are our top priorities in terms of

- **investment**,
- **strategic & operational planning**, and
- **stakeholder engagement**.

Strategic imperatives are high-priority actions needed to accelerate our work in service of the overarching goals. While distinct, these imperatives are interrelated and mutually supportive; **together, they work to accelerate progress toward the 2025 goals**.

Each imperative is supported by **measurable objectives and indicators** essential for measuring progress. Long- and short-range operational plans detail the steps required to achieve our objectives.

By prioritizing our work, we can align internal efforts and those of our external partners to be better stewards of valuable resources.

STRATEGIC IMPERATIVE A:
Strengthen our programs, surveillance, and research through innovation and continuous quality improvement.

In order to shape and deliver the highest quality resources, tools, and guidance for education and health agencies, we must create and improve existing techniques that can work together to strengthen our internal capacity and capability to achieve long-term success. This imperative will work to develop new and sustainable approaches to improve the quality of DASH's core functions—program, research, and school-based surveillance.

OBJECTIVES	TIMELINE
A.1 Develop a refined program model that provides an opportunity to extend DASH's reach.	By 2022
A.2 Expand extramural partnerships and collaborations to support implementation of the refined program model.	By 2022
A.3 Frame the national discussion on improving adolescent health using CDC expertise.	By 2025
A.4 Establish a mechanism to hear from youth, families, and communities to inform DASH's strategies.	By 2025
A.5 Develop a technical package to strengthen linkages within communities to provide behavioral health, mental health, and health care services to adolescents.	By 2025

STRATEGIC IMPERATIVE B:
Integrate priority populations and health issues across program, surveillance, and research.

HIV, STDs, and unintended pregnancy disproportionately impact youth in diverse communities across the U.S. These cultural and ethnic differences in health outcomes are widely known. To protect all youth, it is important that DASH acknowledges and understands the context to tailor approaches to reach those at highest risk before they adopt multiple risk behaviors. This imperative aims to sharpen our focus to effectively respond to growing diversity in the adolescent population and to emerging science.

OBJECTIVES	TIMELINE
B.1 Develop an internal DASH roadmap for reducing adolescent health disparities related to race/ethnicity, sexual orientation, gender identity, and geography.	By 2021
B.2 Cultivate expertise among DASH staff around priority health issues and disparities.	By 2023
B.3 Implement a revised program model and disparities roadmap as reflected in the DASH funding opportunity.	By 2023
B.4 Emphasize the health disparities in the roadmap used in DASH's external facing products.	By 2025

STRATEGIC IMPERATIVE C:
Expand reach to all school-aged youth.

Currently, DASH's school-based HIV, STD, and unintended pregnancy prevention efforts primarily focus on middle and high schools in urban geographic areas. This imperative aims to explore strategies to expand reach to elementary schools and the highest-risk youth in southern and rural geographical areas.

OBJECTIVES	TIMELINE
C.1 Expand program implementation to reach 15% of middle and high school students.	By 2025
C.2 Identify and pilot strategies to effectively reach elementary school students.	By 2025
C.3 Increase reach to rural and/or southern communities with priority populations.	By 2025
C.4 Establish mechanisms for directly communicating to youth, parents, and families.	By 2025

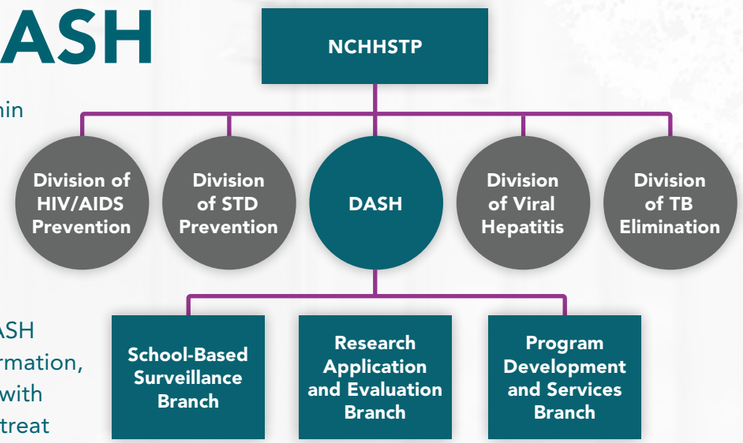
STRATEGIC IMPERATIVE D:
Strengthen and cultivate organizational excellence.

Of the four imperatives, DASH's focus on organizational excellence is the most critical. Sustaining efficient internal operations and capacity to support positive organizational culture is necessary to unlock opportunities in the other three imperatives and help position the division for continuous growth. DASH staff are passionate and have a profound connection to their field of expertise. This imperative prioritizes cultivating and maintaining an organizational environment that supports ongoing employee engagement, rewards and recognition, and workplace learning necessary to attract and retain "best-in-class" staff at CDC.

OBJECTIVES	TIMELINE
D.1 Develop a division-wide workforce plan that articulates staffing goals to achieve DASH's mission.	By 2022
D.2 Create a staff professional development program to increase the job-related knowledge and skills of all staff.	By 2022
D.3 Establish and maintain an organizational culture and climate that values all employees, practices mutual respect, and supports high performance.	By 2025

ABOUT DASH

DASH is one of five divisions within the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) at CDC (see figure), and one of two units at CDC with unique expertise in bridging the public health and education sectors. DASH plays a key role in providing information, tools, and sexual health services with which to prevent, diagnose, and treat HIV, STDs, or pregnancy.



WHAT WE DO: DASH'S PUBLIC HEALTH PREVENTION APPROACH TO SCHOOL-BASED HEALTH PROMOTION AND DISEASE PREVENTION

DASH promotes an evidence-based approach to health that school districts can implement to help prevent HIV, STDs, and unintended pregnancy among students, which involves

- Delivering quality health education.
- Increasing access to needed health services.
- Establishing safe and supportive school environments.

This approach to school-based HIV and STD prevention works to address issues that put youth at risk for several negative health outcomes. Because sexual behavior, substance use, violence, and mental health are interrelated, DASH prioritizes strategies and programs that address these multiple health outcomes through shared protective factors.

Student health and academic achievement are inextricably linked—healthy students do better in school, and students who do better in school are more likely to be healthy. Academic success serves as an indicator for the overall well-being of youth. Addressing health behaviors and experiences in schools provides an opportunity for improving student health and academic performance.

THE 3 CORE FUNCTIONS IN DASH'S PUBLIC HEALTH PREVENTION APPROACH

DASH supports school districts in serving their students, families, and communities with evidence-based strategies known to improve the health of adolescents now and into adulthood. The division stays on top of important trends in adolescent health, translates what works, and supports implementation of best practices through three core functions:

Collect and analyze information about adolescent behaviors and school health policies and practices through

- » The Youth Risk Behavior Surveillance System (YRBSS). Consisting of national, state, and city surveys, YRBSS is the only surveillance system of its kind in the United States.
- » School Health Profiles (Profiles). Containing data on school health policies, programs, and practices, Profiles provides information on student health to CDC and to state and local agencies for decision making.

Research and evaluate CDC-funded programs, emerging health issues, and new interventions.

Support and implement primary prevention of HIV, STDs, and unintended pregnancy through effective and promising school-based programs.

Partnerships: In order to broaden the reach and maximize potential impact of proven interventions, DASH relies on and values partnerships with state, territorial, and local education and health agencies and national non-governmental organizations.

APPENDIX A
2016-2020 STRATEGIC PLAN ACCOMPLISHMENTS

In 2016, DASH released its prior strategic plan, *CDC Division of Adolescent and School Health: Strategic Plan for Fiscal Years 2016–2020*. To date, we have achieved much success in addressing key priorities and maximizing opportunities for primary prevention. The following results from the previous plan laid the groundwork for the development of the 2020-2025 plan.

STRATEGIC IMPERATIVE 1:

Take Sexual Health Education to Scale Nationally to Assure Teens Have Access to Information and Skills Development

OBJECTIVE: Increase the proportion of schools that offer sexual health education

50: Number of states (plus District of Columbia) whose laws and regulations related to health education specific to school-based sexual health, HIV prevention, and STD prevention education were analyzed by DASH.

Supported student health through the Elementary and Secondary Schools Act (ESSA) implementation among DASH-funded sites.

7: research papers published that demonstrate the case for sexual health education.

Updated resources and tools to improve competencies for delivery of school- based sexual health education.

KEY PERFORMANCE INDICATORS

- ✔ **8.3%:** Increase (from 40.2% to 48.5%) in the median percent of high schools that taught 12 key HIV, STD, and unintended pregnancy prevention topics (grades 9-12).
- ✔ **18.5%:** Increase (from 24.4% to 42.9%) in the median percent of secondary schools that provide curricula/ supplemental materials related to LGBTQ youth.
- ✔ **9.6%:** Increase (from 70% to 79.6%) in the percent of 9th grade students nationwide who have never had sexual intercourse.
- ✔ **88%:** Percent of middle schools implementing quality Sexual Health Education.
- ✔ **27%:** Increase (from 61% to 88%) in implementation of Quality Sexual Health Education in middle schools.
- ✔ **10%:** Increase (from 83% to 93%) in implementation of Quality Sexual Health Education in high schools.
- ✔ **3.6%:** Decrease (from 22.4% to 18.8%) in the percent of currently sexually active high school students nationwide who drank alcohol or used drugs before last sexual intercourse.

STRATEGIC IMPERATIVE 2:

Address Confidentiality Protections for Teens to Increase Their Use of Sexual Health Services

OBJECTIVE: Increase the availability of sexual health services for teens

Established new collaboration to address access to confidential and youth friendly health services.

Expanded new online resources and tools for state and local education agencies to implement sexual health services.

Informed the implementation of sexual health services through enhanced research translation and dissemination.

Conducted applied evaluation to assess sexual health services in schools (Duval study of the clinic-based STD screening program).

KEY PERFORMANCE INDICATORS

- ✔ **65,000:** Number of students referred to key youth friendly health services.
- ✔ **0.7%:** Increase (from 46.3% to 47%) in the median percent of schools that facilitated access to providers who have experience in providing health services to LGBTQ teens.

STRATEGIC IMPERATIVE 3:

Expand the Evidence Base Regarding Sexual and Gender Minority Teen Health to Develop Methods that Decrease Risk and Increase Protective Factors

OBJECTIVE: Articulate the state of the science and research priorities

2015: Year Youth Risk Behavior Survey (YRBS) expanded to include sexual minority youth questions, published in 2017 YRBS.

7: Number of analyses released that highlighted disparities among sexual minority youth.

January 2019: Date that DASH-published new gender identity data in the CDC Morbidity and Mortality Weekly Report (MMWR).

Conducted formative research to inform effective interventions for sexual minority youth.

17: Number of articles published related to protective factors and other sexual minority youth supports.

KEY PERFORMANCE INDICATORS

- ✔ **5.0%:** Decrease (from 34.1% to 29.1%) in the percent of sexual minority male high school students in major urban centers who had sexual intercourse during the past three months with three or more persons or who had sexual intercourse during the past three months and did not use a condom or ever injected any illegal drug.

STRATEGIC IMPERATIVE 4:

Integrate Substance Use Prevention into HIV/STD Prevention Efforts for Teens

OBJECTIVE: Increase the availability of tools that incorporate substance use prevention into HIV/STD prevention efforts

2015: Year funding was acquired through the CDC Foundation to implement Teens Linked to Care (TLC), an effort to assess the ability of rural communities to integrate substance use prevention and sexual risk prevention activities in school-based settings.

» Piloted and evaluated TLC in Austin, Indiana; Campbell County, Kentucky; and Portsmouth, Ohio.

2015, 2017: Years new substance use-related questions added to school-based surveys (State Profiles and YRBS) to reflect new and emerging issues, i.e., vaping, opioid use.

2016-2020: Years DASH broadened stakeholder and partner engagement (including key presentations on high-risk substance use at several key conferences and publishing numerous reports).

Key indicators were not available due to the exploratory nature of this strategic imperative.

APPENDIX B
STRATEGIC APPROACHES

TO PROMOTING ADOLESCENT HEALTH THROUGH SCHOOL-BASED HIV AND STD PREVENTION

INPUTS

SCHOOL-BASED HIV/STD PREVENTION

- Health Education
- Connection to Health Services
- Safe and Supportive Environments

RESEARCH AND DEVELOPMENT

- Evaluation and translation of effective interventions
- Development of new strategies
- Investigation of emerging issues

POLICY, COMMUNICATION, AND PARTNERSHIP

- Utilize new and existing relationships to promote school-based prevention
- Expand the reach of our tools beyond funded education agencies
- Ensure resources are available

OUTCOMES AND EVALUATION

SHORT-TERM OUTCOMES

- Increased student receipt of effective health education
- Increased referrals to school or community-based providers
- Increased teacher implementation of best classroom management practices
- Increased student participation in positive youth development activities
- Increased implementation of evidence-based policies for education agencies

INTERMEDIATE OUTCOMES

- Increased knowledge and skills among students to successfully avoid risks for HIV, STD, and unintended pregnancy
- Increased access to and utilization of health services, including STD and HIV testing
- Increased school connectedness
- Increased parental monitoring and communication

LONG-TERM OUTCOMES

- Delayed onset of sexual activity
- Decreased unprotected sex
- Decreased "cluster" of high-risk behaviors (e.g., high-risk substance use, violence, mental health issues)
- Decreased HIV and STD infection
- Decreased unintended pregnancy
- Increased academic success

Monitored through Youth Risk Behavior Survey, School Health Profiles, and Program Evaluation Reports (PERs), depending on the level of focus (e.g., national, state, local).

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