

Youth at Disproportionate Risk (YDR)

Rationale:

Young people who share certain demographic characteristics are disproportionately affected by HIV infection and other STD. Black and Latino young men who have sex with men (YMSM), homeless youth, and youth enrolled in alternative schools are affected at particularly high rates.

Regardless of income level, black and Latino adolescents are disproportionately affected by HIV infection and other STD and have higher rates of pregnancy than white adolescents. Although blacks comprised only 15% of all adolescents aged 13–19 in the United States in 2010, they accounted for 69% of all diagnoses of HIV infection among adolescents. Also in 2010, more Hispanic/Latino adolescents were diagnosed with HIV infection than white adolescents even though there are nearly three times as many white adolescents as Hispanic/Latino adolescents living in the United States.¹

Among adolescent males aged 13–19 years, approximately 91% of diagnosed HIV infections in 2010 were among YMSM.² Youth who identify as lesbian, gay, bisexual, or transgender (LGBT) are more likely than their heterosexual peers to engage in sexual risk-taking behaviors, including earlier age at first sexual intercourse, more lifetime and recent sex partners, and drinking alcohol or using other drugs prior to last sexual intercourse; and are less likely to use a condom during intercourse.^{3,4} Additionally, LGBT students are frequently bullied and harassed and are more likely than heterosexual students to experience a higher prevalence of dating violence and forced sexual intercourse.⁵ As a result, LGBT youth are more likely to have suicidal thoughts or attempts, personal safety issues, and lower academic achievement than their heterosexual peers.^{3,6}

Homeless youth are a vulnerable population with high rates of sexual risk-taking behaviors, substance use, and mental health problems. It is estimated that 1.5 to 2 million youths per year are homeless or have run away from home.⁷ Homeless youth are highly likely to experience early sexual debut, have multiple sex partners, engage in unprotected sexual intercourse, and use alcohol or other drugs prior to sex, resulting in a high risk of acquiring HIV.^{8,9} Although there are no national data available on HIV among homeless youth, community studies have demonstrated a higher seroprevalence among homeless youth than among the general US youth population¹⁰ Some homeless youth may be at additional risk because of a history of childhood sexual abuse and a lack of connectedness to trusted adults and family.⁹

Students in alternative school settings are more likely than students in mainstream schools to engage in sexual risk-taking behaviors. Students in alternative high schools are nearly twice as likely to report ever having sexual intercourse, compared with students in mainstream high schools, and are three times as likely to report having four or more sexual partners during their lifetime.^{11, 12} Among students who are sexually active, alternative school students are less likely to have used a condom during sexual intercourse and are nearly twice as likely to use alcohol or drugs prior to sexual intercourse compared to mainstream high school students.¹³ This pattern of sexual behavior contributes to a greater risk for HIV infection, other STD, and unplanned pregnancy.

Given the disproportionate risk faced by these subpopulations of youth, DASH has asked sites to develop or strengthen efforts for addressing the needs of LGBT youth, homeless youth, or youth in alternative school settings in one of the FOA strategy areas. Sites should choose specific evidence-informed practices on the basis of their particular needs, but might include strategies such as identifying LGBT-friendly health providers; developing guidance to link homeless students to necessary health and social services; and implementing evidence-based interventions that have been designed for use in alternative school settings, such as All4You!

Definitions:

1. **Youth at Disproportionate Risk (YDR)**: Youth at disproportionate risk are defined as youth aged 10–19 that are most likely to be infected with HIV or other STD or become pregnant as a result of social environments where youth are exposed to multiple risk factors and have limited exposure to protective factors, including:
 - youth in communities and/or families already at higher risk as a result of poverty, HIV/AIDS, drug abuse, mental illness, stigma, discrimination, violence, and lack of access to services (e.g., rural areas);
 - youth who live outside of the protective influences of supportive family or school environments (e.g., youth on the street, homeless and runaway youth, youth in foster care, incarcerated youth, youth in gangs, youth subjected to abuse or neglect); and
 - youth who represent the current or emerging face of the HIV epidemic in the United States (e.g., YMSM and youth living in the South).¹⁴

For the purpose of this FOA, YDR for HIV infection and other STD will focus primarily on lesbian, gay, bisexual, and transgender youth, with an emphasis on young men who have sex with men; homeless youth; and youth enrolled in alternative schools.

2. **Alternative Schools**: An educational or instructional facility established for “students who are at risk for failing or dropping out of regular high school, or who have been removed from their regular high school because of drug use, violence, or other illegal activity or behavioral problems.”¹⁵
3. **Homeless Children and Youth**: Per Subtitle B of Title VII of the McKinney-Vento Homeless Assistance Act (Title X, Part C, of the No Child Left Behind Act), “homeless children and youth mean (A) individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1)); and (B) includes—(i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement; (ii) children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 103(a)(2)(C)); (iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and (iv) migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965)

who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in clauses (i) through (iii).”

4. LGBT Youth: Lesbian, Gay, Bisexual, Transgender

- **Lesbian:** Females who identify as being emotionally, romantically, or sexually attracted primarily to other females.¹⁶
- **Gay:** Males who identify as being emotionally, romantically, or sexually attracted primarily to other males.¹⁶
- **Bisexual:** A person who identifies as being emotionally, romantically, or sexually attracted to both males and females.¹⁶
- **Transgender:** “Individuals whose gender, identity, expression, or behavior is not traditionally associated with their birth sex. Some transgender individuals experience gender identity as incongruent with their anatomical sex and may seek some degree of sex reassignment surgery, take hormones, or undergo other cosmetic procedures. Others may pursue gender expression (masculine or feminine) through external presentation and behavior.”¹⁷ Transgender people may identify as female-to-male (FTM) or male-to-female (MTF).

5. Young men who have sex with men (YMSM): adolescent or young adult males who have engaged in sexual activity with partners of the same sex. For the purpose of this FOA, activities designed to meet the HIV/STD prevention needs of 13–19 year-old YMSM also will aim to meet those needs for teenage males who have not engaged in sexual activity with partners of the same sex but are attracted to others of the same sex; or who identify as gay or bisexual or have another non-heterosexual identity.

Resources:

LGBTQ Youth

- The US Department of Health and Human Services Bullying and LGBT Youth Web page <http://www.stopbullying.gov/at-risk/groups/lgbt/index.html#creating>

Homeless Youth

- The US Department of Health and Human Services Administration for Children and Families Runaway & Homeless Youth Web page <http://www.acf.hhs.gov/programs/fysb/programs/runaway-homeless-youth>

Also see resources for [Sexual Health Services](#), [Exemplary Sexual Health Education](#), and [Safe and Supportive Environments](#)

References:

1. CDC. *HIV Surveillance in Adolescents and Young Adults*. U.S. Department of Health and Human Services, CDC Web site. Available at <http://www.cdc.gov/hiv/topics/surveillance/resources/slides/adolescents/index.htm>.
2. CDC. Diagnoses of HIV infection and AIDS among adolescents and young adults in the United States and 5 U.S. dependent areas, 2006–2009. *HIV Surveillance Supplemental Report 2012*;17(No. 2). Available at <http://www.cdc.gov/hiv/topics/surveillance/resource/reports/>.
3. Blake SM, Ledsky R, Lehman MA, Goodenow C, Sawyer R, Hack T. Preventing sexual risk behaviors among gay, lesbian, and bisexual adolescents: the benefits of gay-sensitive HIV instruction in schools. *American Journal of Public Health* 2001;91(6):940–946.
4. Garofalo R, Deleon J, Osmer E, Doll M, Harper W. Overlooked, misunderstood and at-risk: exploring the lives and HIV risk of ethnic minority male-to-female transgender youth. *Journal of Adolescent Health* 2006;38:230–236.
5. CDC. Sexual identify, sex of sexual contacts, and health-risk behaviors among students in grades 9–12 — youth risk behavior surveillance, selected sites, United States, 2001–2009. *MMWR Early Release* 2011;60[June 6]:1–133.
6. Kosciw JG, Greytak EA, Diaz EM, Bartiewicz MJ. *The 2009 National School Climate Survey: The Experiences of Lesbian, Gay, Bisexual and Transgender Youth in Our Nation's Schools*. New York: Gay, Lesbian and Straight Education Network (GLSEN); 2010.
7. Naranbhai V, Abdool Karim Q, Meyer-Weitz A. Interventions to modify sexual risk behaviors for preventing HIV in homeless youth. *Cochrane Database of Systematic Reviews* 2011, Issue 1. Art. No: CD007501. DOI: 10.1002/14651858.CD007501.pub2. Available at <http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD007501.pub2/pdf/standard>.
8. Gangamma R, Slesnick N, Toviessi P, Serovich J. Comparison of HIV risks among gay, lesbian, bisexual and heterosexual homeless youth. *Journal of Youth and Adolescence* 2008;37(4):456–464.
9. Solorio MR, Rosenthal D, Milburn NG, Weiss RE, Batterham PJ, Gandara M, et al. Predictors of sexual risk behaviors among newly homeless youth: a longitudinal study. *Journal of Adolescent Health* 2008;42(4):401–409.
10. Beech BM, Myers L, Beech B, Kernick NS. Human Immunodeficiency Syndrome and Hepatitis B and C Infections Among Homeless Adolescents. *Seminar in Pediatric Infectious Diseases* 2003; 14(1): 12–19.
11. Markham C, Tortolero S, Escobar-Chaves S, Parcel, G, Harrist R, Addy R. Family connectedness and sexual risk-taking among urban youth attending alternative high schools. *Perspectives on Sexual and Reproductive Health* 2003;35(4):174–179.
12. Coyle KK, Kirby DB, Robin LE, Banspach SW, Baumler EE, Glassman Jr. All4You! A randomized trial of an HIV, other STDs, and pregnancy prevention intervention for alternative school students. *AIDS Education and Prevention* 2006;18(3):187–203.
13. Tortolero S, Markham C, Addy R, Baumler E, Escobar-Chaves S, Basen-Engquist K, et al. Safer choices 2: rationale, design issues, and base-line results in evaluating school-based health promotion for alternative school students. *Contemporary Clinical Trials* 2008;29(1):70–82.
14. National Institutes of Health. RFA-DA-04-012: HIV/AIDS, drug use, and highly vulnerable youth: targeting research gaps. Available at <http://grants2.nih.gov/grants/guide/rfa-files/RFA-DA-04-012.html>.
15. CDC. Youth risk behavior surveillance -- National Alternative High School Youth Risk Behavior Survey, United States, 1998. *MMWR Surveillance Summaries*. 48(SS07);1-44. Available at <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss4807a1.htm>.
16. American Psychological Association. *Sexual Orientation and Homosexuality: Answers to your questions for a better understanding*. 2008. Available at <http://www.apa.org/topics/sexuality/orientation.aspx?item=2>
17. CDC. HIV/AIDS and Transgender People: A Factsheet. 2001. CDC Web site. Available at <http://www.cdc.gov/lgbthealth/pdf/FS-Transgender-06192007.pdf>