Sexual Health Services (SHS)



Schools can help increase student access to SHS

Teens in the United States are less likely than younger children and adults to receive recommended preventive health services in general, and often face unique barriers accessing sexual health services (SHS) in particular. Schools play a critical role in facilitating the delivery of SHS to adolescents to help prevent HIV, sexually transmitted infections (STIs) and pregnancy. School districts should help adolescents access SHS either through on-site school services or via referrals to youth-friendly health care providers in the community.

What schools, districts, and administrators can do

In an effort to help school districts, the Centers for Disease Control and Prevention (CDC) convened a meeting of adolescent and school health experts to discuss strategies that state education agencies (SEAs), local education agencies (LEAs), and schools could use to increase students' access to SHS. Participants acknowledged that the strategies districts and schools adopt would largely depend on their local environment. Factors that must be considered include the availability of access to healthcare resources such as: (1) school-based health centers (SBHCs), (2) school nurses, and (3) on-site healthcare providers. Based on the expert meeting, research literature, and resources from the field, the following are some actions that any school district can take to increase student access to SHS, regardless of whether they have an SBHC, school nurse, or healthcare resources:

Action 1: Assess Policy

Federal, state and local-level policies can impact the delivery of SHS to students. These might include educational policies (e.g., attendance policies or prohibition of certain services on school grounds) and those that are not specific to education (e.g., state laws regarding minors' right to consent for confidential services).

- Identify policies at the state and local levels that facilitate student access to SHS.
- Support changes to policies and laws that limit student access to SHS.
- Educate administrators, clinic and school staff, students, and parents on supportive policies that may be misinterpreted or underused.
- Set up direct third-party reimbursement for health services through programs such as Medicaid, the Children's Health Insurance Program (CHIP), and private insurance companies.

Action 2: Use Data for Program Promotion

Data can be used at every step of the program planning and implementation process to support increasing student access to SHS.

- Provide evidence to principals, parents, and the community with data on STI or teen birth rates to show why SHS are needed and to help prioritize resources to schools or communities that need the most assistance.
- Conduct a community service needs assessment to help gain buy-in from school nurses, administrators, and others.
- Use evaluation data to help illustrate the impact that programs have and to help sustain or increase funding.



Depending on the health services available on-site (if any), education agencies and schools can choose partners that best complement existing resources.

- Conduct an inventory of youth-serving and SHS delivery organizations in the community including health and social service providers, local affiliates of national organizations, CBOs, and health departments.
- Identify the roles partners can play in providing services onsite (e.g., conduct school-based screening, provide condoms for condom availability programs, and lecture on sexual health education topics.)
- Formalize partnerships with memoranda of understanding (MOUs), especially for SBHCs where informal partnerships might not work as well. MOUs can include a feedback process to indicate how well the partnerships are working.

Action 4: Develop a Referral System

Referral systems for SHS are often critical for schools.

- Complete an inventory of local providers to include in a referral guide or a list of providers and available services.
- Determine the audience and appropriate formats to disseminate the referral guide or provider list. Audiences may include school nurses, other school staff, or students. Formats might include a smart-phone app, posters listing locations and hours on a map with transportation routes, or a referral guide for nurses that provides more extensive information about the service provider (e.g., services provided, contact person).
- Provide professional development on the use of the referral guide and referral process.
- Market the referral guide to school nurses, other school staff, and students.
- Involve students as peer educators to spread the word about popular places to get tested or help increase student knowledge about the school nurse or staff who will make a referral. Consider having a clinic representative come to the schools to make SHS referrals. This may help establish a relationship between the student and the service provider.

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Parents can be partners for providing adolescent SHS.

- Conduct a parent assessment early in program planning to help ease stakeholder and administrator concerns about parent pushback.
- Consider using consent forms for parent outreach and provide additional information and education about adolescent sexual health needs.
- Invite parents to serve on advisory boards that include SHS issues.
- Recruit parent advocates who are ready to respond to criticism and negative attention about SHS programs as they arise. Use peers to increase parental buy-in. Sponsor parent/teen activities to increase parent engagement.
- Send information to parents on sexual health topics like the importance of parent-teen communication and how to communicate with their teens about sex.

Resources

- "Program 1308 Guidance: Supporting State and Local Education Agencies to Reduce Adolescent Sexual Risk Behaviors and Adverse Health Outcomes Associated with HIV, Other STD, and Teen Pregnancy" <u>http://www.cdc.gov/healthyyouth/fundedpartners/1308/pdf/program_guidance_final.pdf</u>
- 2. "HIV testing Among Adolescents: What Schools and Education Agencies Can Do" http://www.cdc.gov/healthyyouth/sexualbehaviors/pdf/hivtesting_adolescents.pdf
- 3. "Establishing Organizational Partnerships to Increase Student Access to Sexual Health Services: A Resource Guide for Education Agencies." http://www.ncsddc.org/sites/default/files/docs/organizational_partnerships_020615.pdf
- "Project Connect: An Intervention to Link Youth to High Quality Health Care Services" <u>http://www.cdc.gov/std/projects/connect/</u>
- Dittus, P. J., De Rosa, C. J., Jeffries, R. A., Afifi, A. A., Cumberland, W. G., Chung, E. Q., . . . Ethier, K. A. (2014). The Project Connect health systems intervention: Linking sexually experienced youth to sexual and reproductive health care. Journal of Adolescent Health, 55(4), 528-534. doi: 10.1016/j.jadohealth.2014.04.005
- 6. "Developing a Referral System for Sexual Health Services: An Implementation Tool Kit" http://www.ncsddc.org/resources/developing-referral-system-sexual-health-services-implementation-tool-kit
- 7. "Promoting Parent Engagement in Schools to Prevent HIV and other STDs Among Teens: Information for State and Local Education Agencies" http://www.cdc.gov/healthyyouth/protective/pdf/pe-hiv_prevention_rationale.pdf
- "PATHS: Providing Access to HIV Testing Through Schools. A Resource Guide for Schools" <u>http://recapp.etr.org/recapp/documents/programs/PATHS.pdf</u>