Greetings from the Adolescent and Young Adult Health National Resource Center (AYAH Center)!

Your friends and colleagues are pleased to be sharing our bi-monthly newsletters with you. Throughout the year, we will use this newsletter to:

- Provide information about trending topics in adolescent and young adult health and health care
- Share our resources, including resources from the Collaborative Improvement and Innovation Network (CoIIN)
- Keep you up-to-date about upcoming events related to adolescent and young adult health and health care

To subscribe to the newsletter, email Karissa Charles at kcharles@amchp.org. We welcome your ideas and feedback, and you are free to unsubscribe at any time.

Addressing Social Determinants of Health Among Adolescents and Young Adults: Strategies from the Field

Most adolescent health morbidity and mortality is preventable. Social determinants of health (SDOH) are the leading causes of health disparities across the lifespan and have a profound impact on the overall development of adolescents and young adults (AYAs). SDOH include factors such as education, income, race/ethnicity, employment, sexual orientation, and geographic location, as well as the structures and systems that shape the daily conditions of life. Apart from formal policy efforts, health care providers often struggle with what they can do to address social determinants that shape the health outcomes of their patients. In order to promote health equity, we must move beyond the traditional health care context to address social determinants that shape the health outcomes.

In a recent study, we identified innovative approaches across the U.S. where the health care system is engaging with other systems that influence young people, such as schools, juvenile justice, and social service systems, to addressing the root causes of health disparities for AYAs. This study interviewed representatives from 10 such programs to inform and inspire future efforts. Several programs addressed health disparities by increasing AYAs’ access to high-quality, comprehensive, and confidential health care services. In this model, reproductive/sexual health, mental
health, and substance use screening and counseling services are provided in one convenient, centralized location. Additional services were also incorporated to address the needs of the whole AYA population including dental, vision, nutrition as well as educational support, legal/immigration assistance, job training, etc. In another program, technology is used to link low-income individuals with a vast array of community resources. Through a comprehensive, online resource directory that can be accessed on a mobile platform, users can search for and identify services across different programs and/or agencies in their local area and receive links for walking directions or public transportation routes. Another program provided “housing prescriptions” to reduce housing instability among low-income families with young children to improve child and parental health.

Common themes that emerged from our interviews:

- **Build broad-based, multisector community coalitions** who can collaborate effectively to ensure that all community-based organizations and agencies work together to address the key areas of SDOH (such as education, economic stability, social and community content, health and health care, neighborhood, and built environment)
- **Use data-driven approaches**, including the use of both health needs and health impacts assessments to inform policies and practices.
- **Generate locally-driven solutions** to meet the needs of targeted and special populations. For AYAs, this includes youth engagement and youth-centered delivery models that are tailored to their unique needs, including foster care youth and youth involved with the juvenile court system.
- **Advocate for policy changes** that promote social justice, economic, and health equity within agencies, as well as across local, state, and federal government.
- **Utilize new and innovate technologies.**
- **Seek efforts to sustain and leverage each program component** beyond funding from any one stream.

Innovative strategies are needed to address SDOH outside of the hospital/clinic setting to promote access to healthy foods, housing, transportation, employment, etc. as the links between these factors and health outcomes are now well established.

Stay tuned for the full report with extended program detail and findings! Link will be available in an upcoming AYAH Bulletin.

Authors and references for this article can be found on the following page.

Save the Date

- **#effyourbeautystandards**
  - July 11, 2017. 2-3:30 pm ET
  - Join your peers and the AYAH Center’s Glynis Shea in a discussion about how young people translate values to action via technology.

- **2017 International Conference on Adolescent Nursing, Adolescent, and Young Adult Health**
  - Join leading academic scientists, researchers, and research scholars to exchange and share experiences and research results on all aspects of adolescent nursing and adolescent/young adult health. The conference also provides a platform for researchers, practitioners, and educators to present and discuss the most recent innovations, trends, and concerns as well as practical challenges and solutions in the fields of adolescent nursing and adolescent/young adult health.
Save the Date

- 2017 National Conference on Health and Domestic Violence
  Connect with the nation’s leading medical, public health, and family violence experts from across the U.S. with increased international participation to advance the health care system’s response to domestic violence. Workshops, scientific posters, and plenary sessions highlight the latest research and most innovative clinical responses to domestic violence, with a focus on the work being done by health care and public health professionals.

- SAHM 2018 Annual Meeting: Global Adolescent Health Equity
  March 14-17, 2018, Seattle, WA, USA
  Diverse multidisciplinary adolescent health professionals from throughout the world will assemble to share, discuss, critique, and generate strategies that ensure that all young people have full and equal access to opportunities that enable them to achieve healthy, productive, and meaningful lives.

References:

3. Tebb, KT, Pica G, Twietmeyer, L, Diaz A, Brindis, CD. Addressing Social Determinants of Health Among Adolescents and Young Adults: Strategies From the Field: Philip R. Lee Institute for Health Policy Studies and Division of Adolescent and Young Adult Medicine, Department of Pediatrics, University of California, San Francisco: June 2017.

State Highlight: How the CDPHE tackles social determinants of health among Coloradan Youth through their strategic planning

The Colorado Department of Public Health and Environment (CDPHE) houses the Office of Health Equity (OHE), which looks to “build partnerships to mobilize community power and transform systems to advance health equity and environmental justice.” Just recently, OHE revised its mission statement and action plan to create more visibility on its work and communicate effectively to partners and the Colorado community. They have also streamlined their efforts through social media outlets and a bi-weekly newsletter, Change the Story, that provides “inspiration and tools for health equity and environmental justice work.” An internal key strategy that they have put in place to leverage their work among health equity is collaborating with non-traditional partners such as grass root organizations to tackle social determinants of health that affect Coloradans. When state departments are seeking to engage community organizers, what they typically find is that there is no trust with government agencies. A vital approach that OHE takes when communicating with these keys partners is being conscious about power dynamics and being transparent about the efforts and assistance they can fully provide for collaboration. They seek to engage community organizers through several steps:
OHE intentionally works across state government sectors (e.g. transportation, poverty, housing) to ensure conversations around health equity is considered during planning and decision-making.

Within the CDPHE, the Youth and Young Adult Section (YAYA) aligns its MCH work with OHE’s equity definition. The YAYA section has a unique system in which it hires/recruits youth to its youth advisory council “who are representative of our youth population, therefore including youth in child welfare, juvenile justice, those who use and don’t use substances, those who are young parents, those who represent various communities – such as LGBTQ – and those with religious affiliations – such as those in Muslim community.”

Youth on the Youth Advisory Council are paid state employees who are term limited to three years. They qualify for all the benefits a state employee receives such as salary, benefits, retirement, access to state cars, office space, and computers. The access to these benefits positively impacts their social determinants of health by not only allowing access to medical services and receiving salary but also building youth’s educational opportunities and career pathways.

Within this position they are given the opportunity to sit at the table and provide the state department with a youth perspective when discussing strategic planning. To be fully inclusive within the hiring process, staff look for youth that have had diverse life experiences, can connect with other youth, and have a will to challenge Colorado’s system and current processes by changing how CDPHE does business, which can ultimately create uncomfortable conversations for both the youth and state department staff. These difficult conversations create a foundation to moving towards policies, programs, and initiatives to improve the health of all youth not just through the lens of CDPHE, but through a youth perspective.

References

CoIIN Corner

Last month, the second cohort of AYAH-CoIIN multi-disciplinary state teams gathered in Washington, D.C., to kick off their work to improve AYA healthcare delivery. The first cohort of AYAH-CoIIN states joined the fun and shared their successes, lessons learned, and suggestions with the incoming group of state teams. Below is a quick snapshot of the goals that the second cohort of AYAH-CoIIN states are working towards – click on the name of the state to dive into more details.

**Adolescent & Young Adult Health Collaborative Improvement & Innovation Network (AYAH-CoIIN)**

**Meet the AYAH-CoIIN Cohort 2 State Teams**

- **Indiana**
  - is bringing together systems-level and direct-service efforts to increase and to improve preventive health services for AYAs across the state.

- **Maryland**
  - is heightening awareness of the well-visit and ensuring that all AYAs from various backgrounds can connect to health care with which they feel comfortable.

- **New Hampshire**
  - is experimenting with leveraging school policies to increase student well-visits and working with clinics to improve their youth-friendliness.

- **Minnesota**
  - is spreading strategies to increase preventive health visits and to improve the clinic experience with a focus on health care transition and youth in foster care.

- **New Jersey**
  - is focusing on improving access to and quality of adolescent well-visits at Federally Qualified Health Centers (FQHCs) across the state.

- **Washington**
  - is tackling AYA health by utilizing their existing network of School-Based Health Centers (SBHCs).

- **Wyoming**
  - is promoting preventive and quality care for AYAs through innovative education models for providers, parents, and youth.

Click on the name of each state to learn more about the team!
Social Determinants of Health in Adolescent and Young Adult Health Care

From the MCH Community

- **Where Health Begins** is an online toolkit, released by The Association of Academic Health Centers, which contains resources and best practices for addressing the social determinants of health.

Social Determinants of Health Training for Providers and Staff:

- **Screening for Social Determinants of Health Video Curriculum Training for Residents** - a video curriculum that teaches medical residents to understand, screen, and treat SDoH. It offers modules on housing, education, domestic violence, and public benefits, and it uses stories and role playing to demonstrate the impact of detection and appropriate services. The full curriculum is available on the Association of American Colleges’ MedEDPortal website.

- **Social Determinants of Health Academy** - a six-month, virtual training series designed to help health centers and primary care associations develop, implement, and sustain social determinant of health (SDOH) interventions in their clinics and communities. The power of the SDOH Academy is that it doesn’t focus on a single intervention; led by either organizations – all HRSA-designated training and technical assistance hubs – the SDOH Academy offers a coordinated curriculum on multiple community-based SDOH interventions.

Tools to Screen for Social Determinants of Health:

- **PRAPARE Implementation and Action Toolkit** - Protocol for Responding to and Assessing Patients’ Assets, Risks, and Experiences (PRAPARE) is a national effort to help health care centers and providers to collect and use data they need to better understand how to address social determinants of health. It’s both a standardized patient social risk assessment tool and a process to address social determinants of health.

- **Rapid Assessment for Adolescent Preventive Services** - clinical assessment tool (cloud-based or paper format) that helps clinicians address the risk behaviors impacting health, well-being, and academic success in youth. The public health version addresses social determinants of health such as poverty, hunger, housing, and education.

- **Social Determinants of Health: Tools and Resources** - a collection of tools through the Oregon Primary Care Association.

- **Social Determinants of Health** - a collection of tools through the American Academy of Pediatrics.

Colocation of Services:

- **Face-to-Face Health Services** - a non-profit organization in St. Paul, MN that combines and collocates services for youth ages 11-24 including primary care, sexual health, mental health counseling, drop-in center, and street outreach for youth who are homeless. They collaborate and share building space with Face-to-Face Academy, a charter school for youth in grades 9-12.
Social Determinants of Health in Adolescent and Young Adult Health Care

Partnerships to Address Social Determinants of Health:

- **HelpSteps** - an online tool and app that helps screen families for health-related social problems and connect them to health and human services available in Massachusetts. It’s designed to combat the social determinants of health by making services readily available, right at patients’ fingertips. Originally started in a clinical setting, it was expanded to an adolescent and young adult primary care clinic at Boston Children’s Hospital. The effort built on an online resource database or social services created by the Boston Public Health Commission and Action for Boston Community Development. Through a partnership with Boston Children’s Hospital, the databased was refreshed and developed into one central site to screen for social services. The database is continually updated by the Mayor’s Health Line, a health and social service referral line program of the Boston Public Health Commission, while the HelpSteps team manages the software development and enhancement.

- **Medical-Legal Partnership of Southern Illinois (MLPSI)** is a combination of legal aid and health care to improve low-income patients’ situations by addressing their health-harming legal needs and SDoH. Attorneys and paralegals work with health care professionals to offer services to economically disadvantaged people in seven rural Southern Illinois counties around income, housing and utilities, legal status, and personal and family stability.

Upcoming Newsletter Issue

Stay tuned for the August/September issue: *Youth Engagement*!

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