NACCHO
National Association of County & City Health Officials

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2019 Model Practices

Applicant Information

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Size

Select a size: *

☐ Small (0-50,000)   ☐ Medium (50,000-499,999)   ☑ Large (500,000+)

Application Information

Local Health Department/Organization Name: *

DuPage County Health Department

Title of Practice: *

The Ask: Partnering to Connect At-Risk Teens with Sexual Health Resources

Submitter Name: *

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Submitter Title: *

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Practice Categories

Model and Promising Practices are stored in an online searchable database. Applications may align with more than one practice category. Please select the top three that apply most to your practice: : *

☐ Access to Care   ☐ Advocacy and Policy Making   ☐ Animal Control   ☑ Coalitions and Partnerships   ☐ Communications/Public Relations

☐ Community Involvement   ☑ Cultural Competence   ☐ Emergency Preparedness ☐ Environmental Health   ☐ Food Safety

☐ Global Climate Change   ☐ Health Equity   ☑ HIV/STI   ☐ Immunization   ☐ Infectious Disease

☐ Informatics   ☐ Information Technology   ☐ Injury and Violence Prevention ☐ Marketing and Promotion ☐ Maternal-Child and Adolescent Health

☐ Organizational Practices ☐ Other   ☐ Primary Care   ☐ Quality Improvement   ☐ Research and Evaluation

☐ Tobacco   ☐ Vector Control   ☐ Water Quality   ☐ Workforce

Overview: Provide a brief summary of the practice in this section (750 Word Maximum)

Your summary must address all the questions below:

- Brief description of LHD- location, demographics of population served in your community.
- Describe public health issue.
- Goals and objectives of the proposed practice.
- How was the practice implemented/activities.
- Results/Outcomes (list process milestones and intended/actual outcomes and impacts.
- Were all of the objectives met?
- What specific factors led to the success of this practice?
- Public Health impact of practice.
- Website for your program, or LHD.

Please use this portion to respond to the questions in the overview section. : *

Addison is a suburban community with nearly 37,000 residents 20 miles west of Chicago. Addison has the highest teen pregnancy rate in DuPage County. Chlamydia rates are nearly double the average for the county as a whole. In 2017, 67% of children in Addison School District 4 were classified as "low-income" and 68.4% identified as Hispanic.

The health deparmwent and library partnership began in the summer of 2016 with a pilot of an evidenced-based curriculum taught by the health department. Students gave feedback on the course, but also served as a focus group for McFarland and Lynch. They probed the teens for information on what resources they used for health information. The answers were surprising. Students did not want resources online and had a strong preference for face-to-face contact, games, and discussion. They said they were most likely to trust medical professionals, but felt uncomfortable going to a health care provider.

Together, the group built a program called The Ask. The program allows teens to ask questions of a panel of experts. The Ask not only provides information, but also puts a face to local organizations and resources. McFarland and Lynch reached out to local health care providers like the Title X clinic, Teen Parent Connection, and other social services for panelists that could form personal connections with teens.

The panelists are introduced along with the resources they represent. A list of questions submitted anonymously online in advance is compiled. Generally, questions are first asked of the general audience and then turned over to the panel for accuracy and commentary. Participants are given a chance to ask follow-up questions or comment, and discussion sometimes continues among participants. The tone of the entire program is intentionally kept light, encouraging laughter and informal talk between participants and panelists.

Panelists also play a central role by bringing and distributing condoms. It was important to McFarland and Lynch that the program would be known in the teen community as a point of access for protection that was free and confidential. The presence of condoms not only connects teens to a resource, but it establishes the legitimacy of the program. When teens find out that panelists bring condoms, they know that these adults are not afraid to take teen sexuality seriously, that they will be connected with resources they can use. As one participant put it, "The questions were funny in a good way that people was able to laugh at and feel good to be there at The Ask. I loved how they answered questions gently and explaining it. Most people would just be like, uhhhh..look it up online."

A quiz game at the end of The Ask provides another way to get feedback from teens. McFarland and Lynch use the quiz to assess general knowledge of health information, attitudes on health topics, and impact of the program. For example, 90% of participants at one answered "Yes" to the question, "Do I need permission to see a doctor for STD testing." This told McFarland and Lynch that the overwhelming majority of teens did not know their rights and the resources available to them. From that point on, the panel was instructed to highlight free, confidential medical services available to teens at the local clinic.

Initial outcomes are extremely promising. As of May 2018, 19 sessions of the Ask have been hosted at the library with an average of 20 participants per session. Between January 1st and June 30th 2017, use of the local Title X clinic featured on the panel doubled. The clinic attributes this increase to its outreach at the library.

McFarland and Lynch hosted a second pilot of the sex education curriculum in the summer of 2017. The following school year, the district administration agreed to integrate the curriculum into 8th grade health classes.

The health department is considering spreading the model to more communities, using Question and Answer-type events at libraries to address other health disparities. McFarland and Lynch intend to partner on other health topics. They are also presenting on the success of the program at professional library and healthcare conferences to encourage more organizations to use the model of The Ask or partner to address community health needs in non-traditional ways.

http://www.dupagehealth.org/

Responsiveness and Innovation

A Model Practice must be responsive to a particular local public health problem or concern. An innovative practice must be -

1. new to the field of public health (and not just new to your health department) OR
2. a creative use of an existing tool or practice, including but not limited to use of an Advanced Practice Centers (APC) development tool, The Guide to Community Preventive Services, Healthy People 2020 (HP 2020), Mobilizing for Action through Planning and Partnerships (MAPP), Protocol for Assessing Community Excellence in Environmental Health (PACE EH). Examples of an inventive use of an existing tool or practice are: tailoring to meet the needs of a specific population, adapting from a different discipline, or improving the content.

- Statement of the problem/public health issue.
- What target population is affected by problem? (please include relevant demographics)
  - What is the target population size?
  - What percentage did you reach? What has been done in the past to address the problem?
- Why is the current/proposed practice better? Is current practice innovative? How so/explain?

- Is it new to the field of public health?
- Is it a creative use of existing tool or practice?

What tool or practice did you use in an original way to create your practice? (e.g., APC development tool, The Guide to Community Preventive Services, HP 2020, MAPP, PACE EH, a tool from NACCHO's Toolbox etc.)

Is the current practice evidence-based? If yes, provide references (Examples of evidence-based guidelines include the Guide to Community Preventive Services, MMWR Recommendations and Reports, National Guideline Clearinghouses, and the USPSTF Recommendations.)

Please state the Responsiveness and Innovation of your practice : *

Students in Addison were not receiving sufficient information on sexual health during health class at school during the traditional school day. The target population for the project is middle school and high school students in Addison: approximately 4,000 students. The Ask has been running monthly for a year and a half. On average, the program gets about 20 students each time, but they are not always the same students. We have reached about 380 students via the Ask.

To the knowledge of partners involved in this project, there had never been anything done in Addison to address the gap in knowledge of sexual health resources. The Community Guide Preventive Services Task Force has a recommendation for HIV/AIDS, Other STIs, and Teen Pregnancy: Group-Based Comprehensive Risk Reduction Interventions for Adolescents. Our program was modeled around giving teens more information on sexual risk reduction or if they were not yet sexually active, sexual risk avoidance. https://www.thecommunityguide.org/findings/hivaids-other-stis-and-teen-pregnancy-group-based-comprehensive-risk-reduction-interventions. Our project adapts those tenets to allow local organizations to participate in providing medically accurate information in response to students' questions and comments as well as providing resources students can utilize if they need them. The program is also youth-led, meaning their questions and ideas are what leads the program, as opposed to always having pre-set lesson plans.

LHD and Community Collaboration

The LHD should have a role in the practice's development and/or implementation. Additionally, the practice should demonstrate broadbased involvement and participation of community partners (e.g., government, local residents, business, healthcare, and academia). If the practice is internal to the LHD, it should demonstrate cooperation and participation within the agency (i.e., other LHD staff) and other outside entities, if relevant. An effective implementation strategy includes outlined, actionable steps that are taken to complete the goals and objectives and put the practice into action within the community.

- Goal(s) and objectives of practice
- What did you do to achieve the goals and objectives?
    - Steps taken to implement the program
- Any criteria for who was selected to receive the practice (if applicable)?
- What was the timeframe for the practice were other stakeholders involved?
- What was their role in the planning and implementation process?
    - What does the LHD do to foster collaboration with community stakeholders? Describe the relationship(s) and how it furthers the practice goal(s)
- Any start up or in-kind costs and funding services associated with this practice? Please provide actual data, if possible. Otherwise, provide an estimate of start-up costs/ budget breakdown.

Enter the LHD and Community Collaboration related to your practice : *

Goals were to increase student knowledge of STDs, teen pregnancy, and related community resources, provide resources like condoms and informational brochures/websites, increase use of local Title X Clinic and get the schools to participate in the evidence-based curriculum during the school day.

Each partner plays a critical role in the success of The Ask. Funds from the federally funded Department of Health and Human Services Teen Pregnancy Prevention grant awarded to the health department support the panelists' time- 80$ per panelist per night. Although, many of the panelists are able to participate as part of their regular job duties, so funding may not be necessary in all cases or for all people. Food for each program is provided by the library for around 50$ per session and is a proven-to-work incentive for getting young people to show up at a program.

Sponsorship by the health department makes it possible for teens to receive medical information and resources directly without violating professional and legal standards for librarians. The library intended to use the support of the health department to help justify the appropriateness of the possibly controversial program to any concerned patrons or board members, however, the library has received no complaints. The health department was also essential in finding and securing panelists for the program from local health services, organizations with which the library did not have established relationships.

The library was an ideal host for the pilot class and The Ask, because not only was the location already frequented by teens, but also because teen librarians had essential insights into engaging teens and creating developmentally appropriate learning environments. For example, Lynch reframed the pilot class to make it part of the popular teen summer volunteer program. She knew that a classroom model and the stigma associated with sex topics in the community would drive away teen participants. The pilot was marketed as training for a teen leadership council empowering participants to educate their peers on health topics.

The partnership has also sparked a broader collaboration between the school districts, the library, health care providers, and local social services. These stakeholders have gone on to form a committee to develop an online and print resource guide to serve as a comprehensive tool for teens and anyone working with teens. Because of their partnership on the Ask, the library was invited to join the Information and Education Council hosted by the local Title X clinic. The library helped the clinic redesign its website, handouts, and other outreach efforts to be more teen-friendly. Representatives from the clinic set up tables during the library's busiest times with games and incentives to draw teen participants. Most importantly, the pilot classes and the Ask broke the silence on teen sexual health and sparked a culture shift in the community.

Evaluation

Evaluation assesses the value of the practice and the potential worth it has to other LHDs and the populations they serve. It is also an effective means to assess the credibility of the practice. Evaluation helps public health practice maintain standards and improve practice. Two types of evaluation are process and outcome. Process evaluation assesses the effectiveness of the steps taken to achieve the desired practice outcomes. Outcome evaluation summarizes the results of the practice efforts. Results may be long-term, such as an improvement in health status, or short-term, such as an improvement in knowledge/awareness, a policy change, an increase in numbers reached, etc. Results may be quantitative (empirical data such as percentages or numerical counts) and/or qualitative (e.g., focus group results, in-depth interviews, or anecdotal evidence).

- What did you find out? To what extent were your objectives achieved? Please re-state your objectives.
- Did you evaluate your practice?

  - List any primary data sources, who collected the data, and how? (if applicable)
  - List any secondary data sources used. (if applicable)
  - List performance measures used. Include process and outcome measures as appropriate.
  - Describe how results were analyzed.
  - Were any modifications made to the practice as a result of the data findings?

Please enter the evaluation results of your practice : *

Goals were to increase student knowledge of STDs, teen pregnancy, and related community resources, provide resources like condoms and informational brochures/websites, increase use of local Title X Clinic and get the schools to participate in the evidence-based curriculum during the school day.

Collect pre/post quiz data from students at each event using an online system called https://kahoot.com/. Questions are different each time to relfect topics of the session.

The clinic shares teen usage rates with partners and let us know that the rates of teens visiting the clinic doubled from January-June 2017 when compared to Janaury to June 2018.

We adjust programming based on student feedback, what questions they have, and answers to the kahoot quizzes.

Sustainability

Sustainability is determined by the availability of adequate resources. In addition, the practice should be designed so that the stakeholders are invested in its maintenance and to ensure it is sustained after initial development (NACCHO acknowledges that fiscal challenges may limit the feasibility of a practice's continuation.)

- Lessons learned in relation to practice.
- Lessons learned in relation to partner collaboration. (if applicable)
- Did you do a cost/benefit analysis? If so, describe.
- Is there sufficient stakeholder commitment to sustain the practice?
  - Describe sustainability plans.

Please enter the sustainability of your practice : *

The program can be sustained by the library after the health department's grant funding ends in June of 2020. Panelists can participate as part of their regular job duties, so a stipend isn't necessary to maintain the program. The library regularly budgets for food as part of their programming efforts, so they will be able to offer incentives to students who attend this program in the future.

Lynch and McFarland hope that their experience will inspire other organizations in similar communities to address controversial health topics. Resistance from potential partners should not deter organizations from moving forward on projects concerning teen sexual health, drug use, or other taboo health issues. Lynch and McFarland changed attitudes and brought in skeptical partners by harnessing the resources already available to them and demonstrating success. Although the library, the health department, and the school district received no complaints, all three were well-prepared to answer any concerns. Any organization considering similar programs or partnerships should prepare their staff with scripts to respond to potential complaints. Leaders should be similarly prepared to answer to board members, other significant stakeholders, or organized resistance.

Additional Information

How did you hear about the Model Practices Program:: *

- ☐ I am a previous Model Practices applicant
- ☐ At a NACCHO conference
- ☑ Colleague in my LHD
- ☐ Colleague from another public health agency
- ☐ E-Mail from NACCHO
- ☐ Model Practices Brochure
- ☐ NACCHO Connect
- ☐ NACCHO Exchange
- ☐ NACCHO Exhibit Booth
- ☐ NACCHO Website
- ☐ Public Health Dispatch

Have you applied for Model Practices before?: *

☑ No, this is my first time applying.   ☐ Yes, I have applied in the past.

If you answered yes to the question above, please let us know the year and award type. :