

**Quick Stats**

Agency	Start Date	Number Served Annually	Annual Budget
Health and Hospitals Corporation	Spring 2012	<i>See Outcomes</i>	\$500,000

<b>Problem Statement</b>	Unintended teen pregnancy and sexually transmitted infection rates are remain unacceptably high in NYC, and racial and socioeconomic disparities persist. HHC serves over 850,000 patients aged 11-24 per year, and is therefore in a unique position to improve health outcomes among young people from the communities most in need.
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<b>Research and Evidence</b>	In 2009, 87% of pregnancies to 15-19 year olds were unintended, and teens in high-poverty neighborhoods were 3 times more likely to become pregnant than their peers in low-poverty neighborhoods. Black and Hispanic teens, who are more likely to live in high-poverty neighborhoods, had pregnancy rates five times that of their white peers. <sup>1</sup> Young Latino men in NYC, aged 16-24, are 2.5 times more likely to have a child than young White men, and nearly twice as likely as their Black peers. <sup>2</sup> The chlamydia case rate among Black males aged 15-19 is 57 times that of their White peers <sup>3</sup> , and there were more new HIV cases among Black male youth than among Latino, White, and Asian male youth combined. <sup>4</sup> Adolescents obtain health care less often than either younger or older people, and young men are less likely than young women to receive sexual health care services. <sup>5</sup> Primary care providers often miss opportunities to identify and address the sexual health care needs of young people, especially young men. <sup>6-9</sup>
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<b>Program Description</b>	<p>There are three components of this program:</p> <ol style="list-style-type: none"> <li>1. Training for HHC staff serving adolescents and young adults on clinical guidelines and skills, customer service for teens and young adults, and special issues in adolescent care.</li> <li>2. Systems improvements to make HHC facilities more welcoming, appealing, and user-friendly for young patients, to be determined by a needs assessment.</li> <li>3. Youth engagement programming, which involves young people in improving HHC's service quality and accessibility. This will benefit HHC as well as the young people involved, who will gain valuable job and life skills.</li> </ol>
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<b>Implementation Timeline</b>	<ul style="list-style-type: none"> <li>• Summer 2012 – Completed HHC needs assessment, determined youth engagement programming model, formed HHC-wide network of adolescent care professionals and Advisory Panel</li> <li>• Fall 2012 – Training for providers, systems improvements, and community outreach including youth engagement begin in full</li> </ul>
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<b>Target Population</b>	Staff training will target pediatrics, and adolescent care staff. Youth engagement will target adolescents, especially males, from the NYC communities with the highest unintended pregnancy and STI rates.
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<b>Expected Outcomes</b>	<ul style="list-style-type: none"> <li>• Increase staff implementation and adherence to best practices in adolescent care</li> <li>• Increase utilization of HHC services for adolescents/young adults</li> <li>• Increase satisfaction with HHC services among adolescent/young adult patients</li> <li>• Increase positive health outcomes among adolescent/young adult patients</li> </ul>
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