

Attachment B: PHILADELPHIA SHORT-TERM ADOLESCENT STD/HIV PREVENTION PLAN & TIMELINE (18 months) – Feb 10 draft

STD

AACO

HCO

ALL

ACTIVITIES	2011												2012					
	J	F	M	A	M	J	J	A	S	O	N	D	J	F	M	A	M	J
<b>IMPROVE CONDOM ACCEPTABILITY</b>																		
1. Develop custom-labeled condom with youth appeal																		
2. Purchase condoms in different brand varieties																		
3. Elicit adolescent feedback on barriers to consistent condom use; consider use of focus groups*																		
4. Identify local “condom champion” or spokesperson for media and advertising efforts																		
<b>IMPROVE CONDOM AVAILABILITY</b>																		
1. Identify & enroll new sites for condom distribution that are adolescent-friendly																		
2. Update <a href="http://www.STDphilly.org">www.STDphilly.org</a> with condom availability information (locations, hours, method for request)																		
3. Explore potential new mechanisms for condom distribution																		
a. Dispensing through machines*																		
b. Dispensing through mobile van or car*																		
c. Dispensing at schools																		
d. Dispensing thru high school STD screening																		
d. Dispensing through mail*																		
e. Dispensing on special sites/days																		
f. Dispensing at recreation centers																		
<b>MEDIA/ADVERTISING TO PROMOTE CONDOM ACCEPTABILITY &amp; AVAILABILITY</b>																		
1. Identify the Single Overarching Communication Objective (SOCO) using adolescent input																		
2. Contract with agency to create the media &																		

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advertising designs for promoting condom use (per SOCO); should also address barriers to use*		■	■	■														
3. Use advertising materials to initiate traditional media campaign																		
a. Develop & issue press package for variety of venues (Philadelphia Inquirer, Daily News, NPR, television stations)				■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
b. Advertise on SEPTA, local area news papers, and youth oriented sites*				■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
c. Display posters for doctors’ offices, schools, and public venues (malls, shops, distribution sites, recreation centers, etc)				■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
d. Develop speaking points on adolescent STDs for City Officials (mayor, SDP superintendent, PIOs)				■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
4. Develop & implement social media marketing plan																		
a. Create content for 6 months of weekly updates for facebook & myspace pages, twitter feeds including risk group specific content (MSM, black youth, youth with adult partners, females, latino youth)		■	■	■														
b. Create <a href="http://www.STDphilly.org">www.STDphilly.org</a> youth oriented condom pages including general and risk group specific pages				■	■	■	■	■										
c. Recruit youth to provide “I use condoms because” testimonial videos for <a href="http://www.STDphilly.org">www.STDphilly.org</a> and YouTube							■	■	■	■	■	■						
d. Create smart phone app for condom acceptability & availability*													■	■	■	■	■	■
<b>ENGAGEMENT OF COMMUNITY PARTNERS</b>																		
1. Identify all community partners who interact with or provide services to adolescents		■	■															
2. Issue a formal letter describing problem of adolescent STD/HIV, the Department’s new policy, and				■														

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expectations from them																		
<b>FORMAL STD EDUCATION</b>																		
1. Assess the age-specific content, quantity and quality of the school-based STD education program																		
2. Explore feasibility of implementing school-based STD education at an earlier age																		
3. Amend the educational component of the Health Department’s high school STD screening program																		
<b>REGULATORY</b>																		
1. Explore feasibility & legality of Expedited Partner Therapy (EPT)																		
2. Request City Law Dept to issue written opinion authorizing EPT																		
3. Implement EPT within Public Health medical care system																		
4. Explore mandatory adolescent STD testing and/or counseling as part of school admission requirement																		
5. Explore mandatory STD risk screening as part of school health program																		
<b>SECONDARY PREVENTION IN HIGHEST-RISK ADOLESCENTS</b>																		
1. Refer high-risk adolescents (those with multiple prior STDs or 1 <sup>st</sup> STD acquired at esp. young age) to evidence-based behavioral intervention*																		
2. Implement routine STD treatment verification and Partner Services for all adolescents ≤15 years with an STD																		
3. Implement routine STD treatment verification and Partner Services for all adolescents ≤19 years with an STD*																		

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<b>ADDRESSING DISPARITIES IN ADOLESCENT STDS/HIV</b>																		
1. Identify and quantify disparities																		
2. Apply interventional strategies (activities described above) on a geographic level to target specific groups																		
3. Conduct focus groups among specific disparate groups to identify specific issues*																		
<b>ADMINISTRATIVE</b>																		
1. Identify funding needs for resource-dependent activities (identified by asterisk)																		
2. Allocate funding for resource-dependent activities																		
3. Develop long-term plan for youth STD prevention and reduction																		
<b>EVALUATION</b>																		
1. Develop tools & procedures to monitor condom distribution, availability, and impact																		
2. Develop adolescent survey (knowledge, attitude) to assess condom preferences & acceptability; use as a tool to monitor progress*																		
3. Evaluate media/advertising materials through adolescent focus groups*																		
4. Assess trends in adolescent and young adult HIV rates																		
5. Assess trends in adolescent STD rates																		

\*Indicates resource-dependent activity, e.g., acquisition of new resources required to implement activity.

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