



Advisory team members

- **Academic Mentor:** *Primary mentor:* Jon Ellen, MD, Professor and Vice Chair, Department of Pediatrics, Johns Hopkins University School of Medicine; *Advisory mentor:* Freya Sonenstein, Professor & Director of the Center for Adolescent Health Johns Hopkins Bloomberg School of Public Health
- **Community Mentors:** *Primary mentor:* Sheridan Johnson, BA, Community Programs and Projects Coordinator, Baltimore City Health Department; *Advisory mentor:* Pat Paluzzi, DrPh, Director, Healthy Teen Network (organization dedicated to teen pregnancy prevention and healthy parenting)
- **Training Site Directors:** Lee Bone and Janice Bowie, PhD, Associate Professors, Department of Health, Behavior & Society, Johns Hopkins Bloomberg School of Public Health

Targeted competencies

- Understanding social determinants of health and developing skills and commitment for fostering community and social change.
- Knowledge of and skills in applying the principles of CBPR, including the principles, theoretical frameworks, and models and methods of planning, implementing, and evaluating CBPR.
 - Emphasis on negotiating challenges associated with CBPR research to maintain community relationships.
- Understanding the policy implications of CBPR in working with communities in translating the process and findings of CBPR into policy.
- Ability to balance tasks in academia posing special challenges to those engaged in CBPR, in order to thrive in an academic environment.
- Ability to write grants expressing CBPR principles.

Projects

HIV Linkage to Care Program Evaluation

Expanded HIV testing and connecting individuals to care have been identified as core components of comprehensive HIV prevention. Baltimore is a pioneer in integrating HIV testing and care linkage programs to address HIV-related health disparities. The goal of this partnership is to evaluate the ability of HIV programs at the Baltimore City Health Department and affiliated organizations to identify and connect HIV positive individuals into care. To date we have summarized the HIV testing and linkage to care success from 2007 with 767 positive tests (208 new positives). Of the individuals with new HIV positive results, 118 individuals (57%) were linked or in care while only 6 individuals (3%) refused care. The next phase of the project will assess factors that motivate or challenge individuals ability to initiate and sustain care in order to capitalize on those areas to increase the capacity of the program thereby enhancing individual and community health outcomes. In addition, this project is working to develop an intervention to offer reproductive health in the mobile outreach unit on the 'block' (an area of concentrated dance clubs and sex shops).

Policy implications: This work will focus on local policy, in terms of Baltimore City's HIV program guidelines, but will also be useful in informing national urban HIV policy especially as it relates to integrating HIV testing and care linkage programs.

Baltimore City Reproductive Health Committee

Committee comprised of individuals from Johns Hopkins, the Healthy Teen Network, and the Baltimore City Health Department working to develop a strategic plan to reduce the increasing unintended pregnancy rates in Baltimore. We are compiling, collecting, and synthesizing existing data and information on adolescents' reproductive health services (e.g., sexuality education, clinical services) with philanthropic organizational support to the Healthy Teen Network. To date we have identified key stakeholders to invite to the forum, conducted an assessment of the adolescent reproductive health-specific resources in Baltimore, and have hired two research assistants.

Policy Implications: This project will inform local city policies in terms of addressing adolescent pregnancy, birth, and sexual health and will ideally be used as a model for other urban centers in the United States.

Lessons Learned

- Context is extremely important. This has become increasingly apparent with the Baltimore specific issues (e.g., HIV rates) and the complex reputation and perception of Johns Hopkins University in the community.
- Patience and 'showing up' is critical. Community organizations and institutions have different (often competing) priorities and time lines. Balance, balance, balance.
- Policy change is political. I have learned a great deal about the importance of exposure (particularly with attending the Baltimore City Commission on HIV/AIDS meetings with all mayoral appointed members) and the different priorities that people working in different HIV-related sectors bring to the table and how that affects targeted policy change.