

HIV Testing Among Adolescents: What Schools and Education Agencies Can Do



Making HIV testing a routine part of health care for adolescents and adults aged 13–64 years is one of the most important strategies recommended by CDC for reducing the spread of HIV.¹ HIV testing is also an integral part of the *National HIV/AIDS Strategy* to prevent the spread of HIV and improve health outcomes for those who are already infected.² State and local education agencies and schools are essential partners in this effort.

Why HIV Testing Is Important

- More than 1 million persons in the United States are living with HIV infection; of those, one in five do not know they are infected.³
- Learning one's HIV infection status is an important part of prevention. Studies show that people who know they are infected are far less likely to have unprotected sex than those who do not know.⁴
- Early diagnosis of HIV infection and linkage to care enable people to start treatment sooner, leading to better health outcomes and longer lives.

Why HIV Testing Is Important for Adolescents

Adolescents engage in behaviors that put them at risk for HIV infection.

Among U.S. high school students surveyed in 2011⁵—

- 47% have had sexual intercourse at least once.
- 40% of currently sexually active students did not use a condom the last time they had sex.
- 15% have had four or more sex partners.
- 6% had sexual intercourse for the first time before age 13.
- 2% have injected illegal drugs at least once.

Many young people are already infected, and the numbers are increasing.

- Approximately 68,600 young people aged 13–24 years were living with HIV infection at the end of 2008; of those, nearly 60% did not know they were infected.³
- In 2009, an estimated 8,300 young people aged 13–24 years^a were newly diagnosed with HIV infection.⁶
- Although overall rates of HIV diagnoses remained stable from 2006 to 2009, HIV diagnosis rates increased for youth aged 15–19 and 20–24 years over the same period.⁶
- HIV infection rates remain disproportionately high among black and Hispanic adolescents and are still increasing among young men who have sex with men.⁷

Because adolescents have the highest rates of many sexually transmitted diseases (STDs), routine testing for other common STDs is also recommended for sexually active adolescents.⁸

^a In the 40 states with confidential, name-based reporting since at least January 2006.

Data on HIV Testing Among High School Students

National health risk behavior data. Although many high school students engage in behaviors that place them at risk for HIV infection, relatively few have been tested for HIV.

CDC's Youth Risk Behavior Survey (YRBS), a national survey that measures the prevalence of health risk behaviors among high school students, collects data on the percentage of students who have been tested for HIV infection. According to the 2011 YRBS, 13% of 9th–12th grade students had ever been tested for HIV.⁵

HIV testing rates varied by—

- Sexual experience (22% of students who ever had sexual intercourse had been tested for HIV, compared with 5% of students who had never had sexual intercourse)
- Sex (15% of female students had been tested, compared with 11% of male students)
- Race/ethnicity (24% of black students had been tested, compared with 12% of Hispanic students, and 11% of white students)
- Grade (17% of 12th-grade students, 14% of 11th-grade students, 11% of 10th-grade students, and 10% of 9th-grade students had been tested)

In addition, among sexually active students who did not use a condom the last time they had sexual intercourse, only 30% had ever been tested for HIV.

Need for state and local data. Although the national YRBS is useful for characterizing HIV testing trends nationwide, state and local data are also needed to examine local trends in testing behaviors, identify disparities in testing for certain groups, and determine whether young people at high risk are being tested.

States and localities looking to monitor adolescent HIV testing trends in their areas can add the following optional question to their YRBS questionnaires:

Have you ever been tested for HIV, the virus that causes AIDS?

- A. Yes
- B. No
- C. Not sure

Five states and five large urban school districts included the HIV testing question in their 2011 YRBS and had weighted data.^b At these sites, the percentage of high school students who had been tested for HIV ranged from 10% to 18% across the states and from 10% to 41% across the large urban school districts.

Adding the HIV testing question to the YRBS can help states and districts monitor testing rates among high school students, determine whether students in high-risk groups are being tested, and prioritize interventions accordingly.

What Schools Can Do To Support HIV Testing

Teach students about HIV and other STDs.

Educating students about HIV and other STDs might increase students' likelihood of being tested.⁹ According to an analysis of YRBS data, HIV testing was more common among students who had ever been taught in school about AIDS or HIV infection (13%) than among those who had not (10%).⁹ The 2006

^b Weighting is a mathematical procedure that makes data representative of the population from which it was drawn. In the YRBS, only surveys with a scientifically drawn sample, appropriate documentation, and an overall response rate of at least 60% are weighted.



School Health Policies and Programs Study found that nationwide, in required health education courses, 85% of high schools taught students how HIV is transmitted and 77% taught students how HIV is diagnosed and treated.¹⁰

Promote communication between parents and adolescents.

Effective communication between parents and adolescents about HIV is also important. Approximately 60% of adolescents aged 15–19 years report that they have not had a conversation with their parents about how to prevent HIV infection.¹¹ Schools can encourage activities shown to have a positive effect on parent-child communication, such as assigning sex education homework assignments to be completed with a parent or trusted adult, or providing multi-session parent-child sex education programs.¹²

Teach students how to find HIV counseling and testing services.

Approximately 76% of high schools teach students how to find valid information or services regarding HIV or HIV counseling or testing.¹⁰ High schools can enhance their HIV prevention curricula by including information on locations and procedures for obtaining free or low-cost confidential HIV testing. Other awareness-building activities include promoting evidence-based social media programs such as the Get Yourself Tested (GYT) campaign; encouraging peer-to-peer outreach on HIV testing; or arranging visual media contests, health fairs, or student assemblies for National HIV Testing Day.¹³

Provide referrals to testing, counseling, and treatment services.

Many schools coordinate with local health centers and community-based organizations to help students receive needed screenings and treatment.¹³ When providing referrals to students, school health service staff should thoroughly explain the reasons for referral, provide information about the referred provider, and maintain contact with the student to ensure that services are meeting his or her needs.

Provide on-site testing for HIV and other STDs.^c

Some schools and school-based health clinics offer testing on site, which has been shown to be cost-effective in areas with higher prevalence.¹⁴ For example—

- School-based health centers across Seattle provide free, on-site clinical services, including HIV and other STD counseling and testing.
- In Philadelphia, all 9th-grade and transfer students are offered chlamydia and gonorrhea testing at school, in collaboration with the health department. Students who test positive are provided treatment at school and are referred locally for HIV testing.
- In Puerto Rico, the Department of Health collaborated with the Department of Education to conduct HIV and other STD counseling and testing in public high schools across the island.

School Policies to Support Students with HIV

Whether HIV testing is done on site or through referral, schools should follow appropriate federal, state, and local laws regarding confidentiality of student health status and medical records, as well as support reasonable attendance

^c Funding from CDC's Division of Adolescent and School Health (DASH) may not be used for clinical testing, screening services, direct delivery of patient care, or treatment services. However, DASH-funded partners can play a significant role in promoting policies and practices that encourage HIV and STD testing among adolescents, including surveillance activities.

and leave policies that allow students access to necessary medical care.¹⁵ To foster supportive school environments for students with HIV infection, schools should promote school policies that provide reasonable accommodation for HIV-infected students and staff (e.g., on-site health services, guidance for medication administration and self-administration during the school day, or alternative school placements for students with serious medical needs) and that comply with applicable federal, state, and local laws.¹⁶

HIV and STD Testing Resources

- CDC HIV Testing: www.cdc.gov/hiv/topics/testing/index.htm
- National HIV and STD Testing Resources, a searchable database of testing sites by city, state, and ZIP code: www.hivtest.org
- Adolescent AIDS Program information about youth-friendly HIV testing, counseling, and care: www.adolescentaids.org



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