



RAAPS Public Health (PH)

Identify Risks. Improve Outcomes. Change Lives.

RAAPS-PH was developed in collaboration with the Center for School, Health and Education (CSHE). CSHE was established at the American Public Health Association (APHA) in 2010 to advance the vision that all students graduate on-time. Through partnerships, policy change, and advocacy, the CSHE seeks to promote systemic conditions that support health, well-being, and educational success of all children and adolescents.

A core element of the CSHE strategic approach is to assess school-wide, the prevalence of social and environmental factors that put students at risk for poor health, unhealthy behaviors, and problems in school. The instrument developed and used for this purpose is the Rapid Assessment for Adolescent Preventive Services – Public Health (RAAPS-PH).

The Rapid Assessment for Adolescent Preventive Services- Public Health (RAAPS-PH) standardized screening and counseling system was developed especially for youth impacted by poverty-generated conditions.

Urban, minority youth living in poverty are at the highest risk for dropping out of high school. Yet, the myriad of social and environmental factors that increase their risk for dropping out can be identified in advance. This too, can avert the harmful emotional and behavioral health consequences of these factors, including stress, depression, substance abuse and absenteeism.

RAAPS-PH identifies the inter-related factors contributing most to school dropout through a youth-friendly technology based assessment and offers a foundation of information for professionals developing risk-reduction strategies.

RAAPS-PH is designed to help professionals identify the complex web of risk factors influencing school dropout:

- ➔ **Uncontrolled asthma** is linked to increased absenteeism among youth
- ➔ **Teen pregnancy** increases the likelihood of girls dropping out of school
- ➔ **School violence** impairs attention and concentration, increasing the likelihood that youth will be discouraged from attending school
- ➔ **Hunger** increases the likelihood of impaired attention and concentration and diminished academic performance
- ➔ **Physical inactivity** is associated with poor academic behavior (e.g., classroom conduct) among adolescents

RAAPS-PH Offers a Standardized Approach to Risk Screening:

➔ *Because...*

- As humans we are forgetful & have subconscious biases
- We don't ask the same questions every time in the same way
- And *How* we ask a question affects the answer we get from youth

➔ *Standardized Tools...*

- Are scientifically validated to increase effectiveness
- Ensure *All* the right questions are asked, and in the *SAME* way, every time
- Meet requirements for billing and insurance reimbursement



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IDENTIFYING THE SOCIAL FACTORS THAT DERAIL YOUTHS' SUCCESS IN SCHOOL AND HEALTH:

RAAPS-PH provides information to track improvements, identify population trends, and answer the tough questions:

- How many youth are missing school because they have to take care of someone, work, or have problems getting to school?
- What are the rates of homelessness among urban, minority youth?
- Who are the youth living without electricity or water?
- How many youth experience racial or sexual orientation discrimination?

RAAPS-PH engages youth to get honest answers – revealing actionable risk information about urban, minority youth living in poverty, who:

Had higher risk rates than “average”:

- Rates of poverty are nearly four times higher for African American and Hispanic youth and their graduation rates are at least 10% lower than their white peers¹
- 39% missed school because of caregiving responsibilities, work, or transportation challenges²

Were failing in the school-environment:

- 20% of African American males received out-of-school suspension (twice that of White males)²
- 32% earned less than a C in all classes²
- 8.9% had trouble studying outside of school because they didn't have electricity²

Experienced unstable environmental conditions:

- 13.6% reported not having running water where they reside²
- 8.6% stayed in a shelter, motel, or some other place because they didn't have a home to stay in²

Examples of School-wide Improvements as a Result of RAAPS-PH ²:



- Promotion of transportation services for students as safety measure
- Engagement of community-based resources to connect students and families in need with services
- Establishment of child development center for students with caregiving responsibilities

¹ <https://www.wsws.org/en/articles/2013/04/10/hsdo-a10.html>

² Survey Results from RAAPS-PH in One School

A Proven System and Infrastructure:

RAAPS-PH builds on the core Rapid Assessment for Adolescent Preventive Services (RAAPS) system.

RAAPS is a web-based comprehensive system developed in 2009 at the University of Michigan that has been proven to identify the risk behaviors that contribute most to adolescent morbidity and mortality.

RAAPS is a trusted, effective resource. Currently, over 250 agencies (including School Based Health Centers, Primary Care & Pediatric Clinics, and Sexual Health/Reproductive Health Centers) are using the RAAPS system with over 80,000 adolescents.

In a published evaluation of RAAPS: 98% of providers indicated that they would recommend RAAPS system to other providers. The most common reasons cited:

- RAAPS ability to provide comprehensive screening
- RAAPS effect on improved communication between providers and patients
- And RAAPS influence on increasing patient understanding of their risk behaviors.