

## # 2 | POSITIVE AFFIRMATIONS FOR YOUTH

**Category:** Education and Treatment Adherence

**Agency:** Boston Medical Center Pediatrics

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**Subpopulation:** Youth

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**Regional Group:** Massachusetts

**Evidence of Improvement:** Yes

**Other Data:** Yes

**Intervention:** Sent personalized positive affirmations to youth (13-24 years) through Care+ app, as a pilot study, twice a week.

### Change Ideas:

- Designated medical case managers and peer navigators to send virtual positive affirmations, individualized for each patient, with "I" or action statements, such as "I'm comfortable looking in the mirror" or "My happy thoughts create my happy body"
- Read receipts on positive affirmations sent through Care+ app as a measure of effectiveness
- Designated patient navigator or medical case manager to send positive affirmation messages to patients they know best consistently, tracked via calendar, and decided standard frequency of messages being sent

### Intervention Description:

This intervention sought to reach youth ages 13-24 years through messages of personalized positive affirmations sent through a HIPPA secure app (CarePlus). A Cause and Effect Diagram was used to identify possible causes to poor medication adherence in youth patients. Lack of motivation, isolation, mental health dx, an "I'm fine" attitude, denial of a negative impact on life if non-adherent, and no consequences were found. In response to these, this intervention was implemented between February 2019 until May 2019. Two medical case managers, a social worker, and a peer navigator sent messages twice a week for two 6-week phases to eight HIV-positive youth with medication adherence difficulties, as a pilot study. Sixty-eight different positive affirmation messages sent were individualized for each patient, using "I" or action statements, such as "I'm comfortable looking in the mirror" or "My happy thoughts create my happy body." Participating youth received a text message notification to check the app when a new message was delivered. The CarePlus app showed the 'read date' of each sent message. This intervention was evaluated using process measures of medication and self-esteem questions at pre-intervention, after the first 6-week phase, and at the end after the second 6-week phase. These client surveys showed a major shift in attitudes with more people feeling positively about themselves between the start of the intervention and at the 6-week mark. The medical case managers monitored when clients read the messages via the app. In the first phase of the intervention, 70 out of 84 expected messages sent were read. In the second phase, 40 out of 48 expected messages were read. Viral suppression among youth increased from 88% (46/52) to 93% (43/46) before and after the intervention, respectively.

<p><i>Do you have measurable data to demonstrate the effectiveness of this intervention?</i></p> <p><b>Yes</b></p>	<p><i>How effective was this intervention to increase viral suppression or reduce HIV disparities? (Scale from 1-4)</i></p> <p><b>3-Effective</b></p>	<p><i>What are the start and end data points for the intervention to indicate the measurable impact?</i></p> <p><b>Chart in "Pos Affirmation QI Project" see slides 7 and 8</b></p>	<p><i>Was this intervention tested/implemented during the Collaborative?</i></p> <p><b>Yes</b></p>
<p><i>Is this intervention replicable across other HIV subpopulations of the Collaborative?</i></p> <p><b>Yes</b></p>	<p><i>How do you rate the ease of replication of the intervention by other HIV providers? (Scale from 1-4)</i></p> <p><b>4-Very Easy to Replicate</b></p>	<p><i>How much financial support do you estimate was necessary to test your intervention per patient? (\$-No Additional Agency Costs; \$\$-\$-1 to 49 US Dollars; \$\$\$-50-99 US Dollars or more; \$\$\$-100 or more US Dollars; Don't Know)</i></p> <p><b>\$-No Additional Costs</b></p>	