

March 10, HIV/AIDS in Women and Girls Awareness Day
March 20, National Native HIV/AIDS Awareness Day
April, STD Awareness Month

From the CEO

Welcome home! It may seem like a strange way to start a column but for those of you who were with us in Washington for the 2008 AMCHP Conference I hope your trip home was easy and you have fond memories of our time together. It was an exciting event and plans are already in the works for our 2009 Conference which will be held February 21-25, at the Marriott Wardman Park in Washington, D.C. – just a little more than 11 months away! If you were not able to join us this year we look forward to welcoming you to the conference next year. Stay tuned for more details.

This month's issue of *Pulse* focuses on Sexually Transmitted Disease (STD) Awareness and HIV/AIDS in women. Just last week I read shocking new reports on the current rates of sexually transmitted infections (STI) among young women. The data cited in these reports are cause for renewed vigor in our efforts to prevent STDs and call for creative new approaches to address the issues related to STDs in our states and communities. In one study, 25 percent of the young women surveyed had at least one STI, and almost half of the young African-American women in the study reported a STI. The most common infections reported were human papillomavirus (HPV), chlamydia and genital herpes.

Think about that for a moment. A quarter of the young women in the study population had at least one STI and close to half of the African-American women in the study reported a STI. These are women aged 14 to 19. They are our daughters, granddaughters, sisters, cousins and other important young women in our lives. These infections are 100 percent preventable: interventions exist to stop the transmission of every disease in the study. But still, 1 in 4 young women surveyed had at least one STI. Even more alarming is the fact that many women did not know they were infected. Not being aware of the infection means these women are not seeking treatment, may be transmitting the infection to others, and are at risk for further health complications and major conditions including infertility and cervical cancer.

AMCHP is working to address these and other reproductive health issues in several ways. Through collaborative work we are supporting existing state MCH programs in their work to reduce the rate of STIs in all populations, including adolescents. Title V, Title X directors and state adolescent health coordinators work together on a daily basis with other programs to raise awareness about STDs, promote interventions to stop new infections, and create new ways to address these problems in their states and localities. AMCHP is collecting best practices and models that work on the issue of adolescent sexual and reproductive health and health disparities. If you have a practice that is working, we can share it with your colleagues and help other state programs address these challenges in the future. I urge you to let us know how your programs are making a difference, and help us share what works nationally.

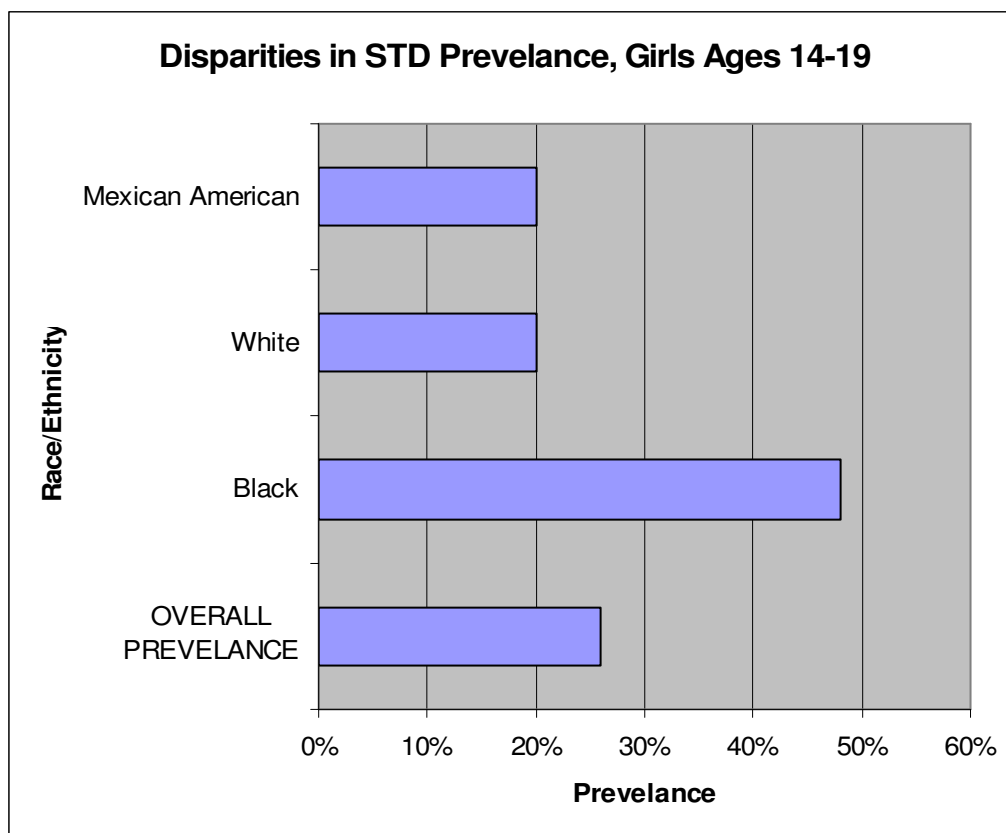
Unrelated but also important, I would like to take this opportunity to welcome AMCHP's newest Board members. Please join me in congratulating Linda Jones-Hicks (region II), Daniel Bender (region IV), Kathy Stiffler (region V), and Mary Marin (Family Representative). AMCHP's current Treasurer, Loretta (Deliana) Fuddy, and Secretary, Millie Jones, were both re-elected to the Board as was Melita Jordan (region III) and Melinda Sanders (region VII). I would like to thank these members for volunteering their time and talent to AMCHP, and I know they will work hard to represent AMCHP members throughout their time on the Board.

In other AMCHP news, the AMCHP Board approved a "Smoke Free Meetings" policy. This policy puts AMCHP in line with other public health organizations and CDC recommendations regarding the selection of in-person meeting sites, and requires AMCHP to meet in facilities that are entirely non-smoking. AMCHP will work with its meeting planner and partners to assure that sites selected for our meetings are held in jurisdictions that are smoke free, or at properties that ban

smoking. And wait, there is more – we may even be looking to site our meetings at “green” hotels and hotels that have healthy food choices and menus that promote sensible, healthy eating. All of these efforts are part of AMCHP “walking the walk” on its health promotion activities. We hope you appreciate these efforts, and will work with us to implement these policies in the future.

AMCHP is on the move, and there is lots of activity I’d like to share with you concerning our policy and program work. The next few weeks will be critical to our efforts to fully fund the Title V MCH Block Grant. We need your help to amplify the work AMCHP is doing on your behalf. For more information on our policy activities, see this week’s legislative corner – there is a lot to do and we need all the voices we can get to advance our call for full funding. I hope we have great news to report as we move forward together.

Trends



Graph based on study [released by CDC](#) March 11, 2008.

Features

Health & Education Staff Work Together to Prevent HIV, STD and Teen Pregnancy – The National Stakeholders Meeting (NSM) is a collaborative project of AMCHP, the [National Association of State and Territorial AIDS Directors](#) (NASTAD), the [National Coalition of STD Directors](#) (NCSD), and the [Society of State Directors of Health, Physical Education, and Recreation](#) (the Society) and is supported by CDC’s [Division of Adolescent and School Health](#). The meetings bring together state teams with the goal of strengthening collaboration between state health agencies and state education agencies to support and improve HIV, STD, and unintended and teen pregnancy prevention for school-aged youth. The NSM is one activity that helps AMCHP achieve one of its [priority goals](#) related to adolescent preventive health: working with state Title V/MCH programs to improve the health and safety outcomes for adolescents and young adults. To date, 33 states have participated in a National Stakeholders Meeting. (See a [map](#) of participating states.)

The most recent NSM was held in January 2008 with teams from Alaska, Arizona, Kentucky and Massachusetts. These teams are now participating in a year-long follow-up process with the four national partners to support implementation of the collaborative action plans they created at the meeting. This process includes various types of support from the national partners, including follow-up calls and the opportunity to apply for mini-grants and technical assistance visits. The teams will be working on such activities as enlisting the support of faith-based and community stakeholders to support their efforts; sharing data and surveillance across agencies; collecting medically accurate best practices in prevention for dissemination to school districts and health care providers; and, developing state policies to improve adolescent prevention efforts.

The national partners are conducting a needs assessment in preparation for a “Reconvene” meeting in January 2009 that will bring together selected state teams that previously participated in the NSM process to help further institutionalize the collaboration. The partners are also working on resources to summarize the successes of the project over the past five years – look for more information in upcoming editions of *Pulse* and on the updated [adolescent health section](#) of the AMCHP website!

If you would like more information about the NSM, please contact [Rebecca Barson](#).

National Public Health Week is April 7-13 – The theme of this year’s National Public Health Week is *Climate Change: Our Health in the Balance*. There is a direct connection between climate change and the health of our nation today. Yet few Americans are aware of the very real consequences of climate change on the health of our communities, our families and our children. The public health community can help make the connection between the way we lead our lives, our impact on the planet and the planet’s impact on our health. By highlighting these links, we can help Americans make choices and lead life-styles that are healthy for them, their families, their communities and the climate. Doing so will help communities prepare to manage and lessen the impacts of climate change. Check out the [National Public Health Week website](#) to learn more and download a NPHW toolkit with fact sheets, media outreach materials and suggested community events.

Premiere: Unnatural Causes... Is Inequality Making Us Sick? – This four hour documentary series will explore racial and socioeconomic disparities in health care in the U.S. The first segment will air at March 27 at 10 p.m. (9 p.m. Central) on PBS, and continue the following three Thursdays.

MCH Success Stories

The Benefits of Collaboration - One of the features of the [National Stakeholders Meeting](#) (NSM) is a chance for state teams to hear from previous NSM participants during the Learning from Experience panel. Hearing from the panelists provides a good overview of the kinds of activities that state teams often undertake during and after participating in the NSM process and highlights some of the many successes of the project, ranging from policy implementation, to curricula development, to previously unseen state-level coordination. During the January 2008 NSM, the panel featured: Pam Tollefsen representing Washington’s 2003 team; Debra Szejda representing Michigan’s 2005 team; and, Lucy Gibson representing South Carolina’s 2007 team. California’s NSM team also presented successes at this year’s AMCHP annual conference.

Washington State’s participation in the NSM helped lead to the 2007 enactment of the Healthy Youth Act in the state. The Healthy Youth Act requires that if sex education is taught in a school in the state, it must be medically accurate and meet guidelines that have been jointly established by the state’s Department of Health (DOH) and Office of the Superintendent of Public Instruction (OSPI) for effective prevention curricula. DOH and OSPI have continued to collaborate closely as the law nears its implementation date in September 2008. Washington also participated in the AMCHP-CityMatCH [Teen Pregnancy Prevention Roundtable](#) in October 2007, which brought together state, local and community representatives; their team focused on implementation of the

Healthy Youth Act in two counties of the state. More information about the Healthy Youth Act is available [here](#). To find out more, contact [Marla Russo](#), Washington's teen pregnancy prevention coordinator.

After attending the January 2005 NSM, the Michigan team named itself State Advisors on Adolescent Sexual Health (SAASH). The team created a matrix of their collaborative activities and has worked together on the development a high school HIV/STD curriculum, the ongoing assessment of the status of HIV/STD education in local school districts, and a statewide youth conference. In addition, with the help of a mini-grant from the national partners, they were able to produce a joint [white paper](#) on the "State of Adolescent Sexual Health in Michigan" that was released in December 2007. For more information about SAASH, contact Michigan's state adolescent health coordinator [Carrie Tarry](#).

Even though the South Carolina team has been working together for less than a year, they have already spread the word about their activities in their respective agencies and been working on an "executive summary" of their priorities to assist them in orienting new leadership to their work. In addition, they were awarded a mini-grant and a technical assistance site visit and will be using those to convene a "Call to Action" meeting in June with a variety of interested stakeholders to highlight the need for adolescent HIV, STD, and unintended and teen pregnancy prevention in the state. With their mini-grant award, the team will also be working on joint materials for use at conferences and presentations to give the team a unified presence and message for their future collaborative work. For more information, contact South Carolina's state adolescent health coordinator [Lucy Gibson](#).

Attendees at AMCHP's annual conference also heard a success story coming out of the NSM from California during the session "California Adolescent Sexual Health Workgroup: Collaboration Brings Unanticipated Benefits." Since participating in the first NSM in 2003, California's team established the Adolescent Sexual Health Workgroup (ASHWG), which has helped to institutionalize state health and education agency collaboration. They have also added numerous partners, including non-profit groups like the California Family Health Council, the state's Title X family planning grantee, and local health and education agencies, to their activities. They have established five priority areas and have focused their activities so far on two: data integration, including the creation of statewide data sets for adolescent HIV, STD and teen births for 2000-2006 which have standardized measures for age, race and timeframe; and the development of "Core Competencies for Providers of Adolescent Sexual and Reproductive Health Programs and Services." These core competencies aim to develop benchmarks for core knowledge and skills needed to provide effective and appropriate services across program types (STD, HIV, family planning, etc.) for all staff that work with adolescents. They are currently close to being completed, and AMCHP looks forward to helping to distribute them to the MCH community when they are – stay tuned! For more information about ASHWG, contact [Karen Ramstrom](#) in California's Maternal, Child, and Adolescent Health Program.

Legislative Corner

AMCHP Past Presidents Join Call for Full Funding of MCH Block Grant – On March 10, eight former presidents of the Association of Maternal and Child Health Programs joined together in sending a [letter to Congressional leaders](#) supporting full funding for the Title V MCH Services Block Grant. The letter lays out the case for why full funding is needed and concludes by stating, "As public health professionals with decades of collective experience in leading state MCH programs, we urge your help and leadership to fully fund the Title V Maternal and Child Health Services Block Grant at \$850 million for FY 2009."

AMCHP Builds on Senate Amendment Recommending MCH Funding Increase – With Congress in the middle of a two week spring recess, AMCHP has been strategizing on how to best capitalize on the Senate's passage last week of an [amendment recommending full funding](#) the MCH Block Grant at \$850 million in FY 09. Sen. Chris Dodd (D-Conn.), the lead sponsor of the amendment, released a statement [here](#) applauding the Senate's adoption of this measure.

Action now turns to the Congressional Appropriations Committees. While the amendment is a tremendous step forward, it does not guarantee that those committees will recommend the full \$850 million for the MCH Block Grant. AMCHP is planning now to continue our work to convince the Appropriations Committees to follow through on the budget resolution recommendation. AMCHP will issue a Legislative Alert with additional details the first week of April when Congress returns.

New Legislation Calls for Medicaid Reg Moratorium – House Energy and Commerce Committee Chair John Dingell (D-Mich.) introduced the “Protecting the Medicaid Safety Net Act of 2008,” ([HR 5613](#)) on March 13 that would postpone seven new Medicaid regulations for one year. The rules in question would affect payments for: case management services that allow people with disabilities to remain in the community; public safety net institutions; coverage of rehabilitation services for people with disabilities; outreach and enrollment in schools as well as specialized medical transportation to school for children covered by Medicaid; graduate medical education payments; coverage of hospital clinic services; state provider tax laws; and, appeals filed through Health and Human Services. According to the Congressional Budget Office, nearly \$20 billion in funding is at stake during this five-year period. AMCHP has been working with a coalition opposed to the regulatory changes, and signed on to this Feb. 20 letter [to Congressional leaders](#) urging passage of a legislative moratorium.

Publications & Resources on HIV/AIDS and STDs

AMCHP Publications on HIV and HPV

- [2007 Survey of State Perinatal HIV Programs](#)
- [Women and HIV](#)
- [Women, HIV/AIDS and Disparities](#)
- [Toward Universal HIV Screening for Pregnant Women](#)
- [The HPV Vaccine: Background, Coverage & Benefits](#)

African American Women and HIV/AIDS: Confronting the Crisis and Planning for Action – AMCHP will host this informational call on Fri., April 4, 2-3 p.m. ET. The call will feature a presentation from the [National Alliance of State and Territorial AIDS Directors](#) (NASTAD) to provide capacity-building assistance related to HIV prevention for women to health departments along with state highlights from Iowa and Michigan. You must [register online in advance](#) for this call, by Fri., March 28. Call-in materials will be sent via email on April 2. For more information, contact [Rebecca Barson](#) or [Sharron Corle](#) via email or at (202) 775-0436.

Teen Pregnancy and HIV/STI Infection Training Opportunity – AMCHP and the National Association of County and City Health Officials (NACCHO), with the support of the Annie E. Casey Foundation, have formed a partnership to fund and support state-local teams of public health practitioners to tackle the issue of teen pregnancy and/or HIV/STI infection in a local community within their respective states. AMCHP and NACCHO will select up to five teams to receive financial and technical assistance to support collaborative efforts to implement an evidence-based program to address teen pregnancy and/or teen HIV/STI infection at the local level and document successes, barriers and lessons learned. For more information, contact [Sharron Corle](#) via email or at (202) 775-0436. Click here for the [full request for applications](#) and the [application](#). **Deadline: April 4**

HPV Vaccine: Implementation and Financing Policy in the U.S. – This recently updated fact sheet from the Kaiser Family Foundation on human papillomavirus (HPV) vaccine provides background information and highlights key issues related to implementation and financing policy.

2008 National STD Prevention Conference – The official website of the 2008 National STD Prevention Conference, held March 10-13, will soon feature recordings and materials of the

sessions. It includes [summaries of research](#) on women and girls and STDs, including the study that 1 in 4 adolescent girls is affected with a STD.

[2007 National HIV Prevention Conference](#) – This conference website features archived webcasts of plenary sessions and a web library of PDF presentation slides from plenary, workshop and concurrent sessions. The web library can be searched by population or track.

[National Native American AIDS Prevention Center](#) – This center provides a variety of resources related to HIV/AIDS prevention in the Native American community, including an [online toolkit](#) to improve public health program capacity to address these issues with the Native population and [fact sheets](#) about the HIV/AIDS epidemic as it relates to the Native American community.

[Advocates for Youth](#) has a variety of resources available relating to the reproductive and sexual health of [adolescents of color](#), including fact sheets on [“HIV and Young American Indian/Alaska Native Women;”](#) [“The Sexual Health of Asian-American/Pacific Islander Young Women: Focus on Assets;”](#) [“The Sexual Health of Latina Adolescents: Focus on Assets;”](#) and [“Young African American Women and HIV.”](#)

[New CDC-DASH Funded Partners Information](#) – Updated information about the state, territorial, and local education agencies and tribal governments that have been funded for the next five years for HIV prevention, YRBS administration, coordinated school health, asthma management, and professional development can now be found on the Centers for Disease Control and Prevention, Division of Adolescent and School Health’s website. Five state health agencies were also funded for YRBS administration. Three tribal governments were funded for the first time under this cooperative agreement to work on HIV prevention, YRBS administration and coordinated school health.

Adolescent Reproductive/Sexual Health Disparities Survey – AMCHP’s Strategic Plan has identified health equity as one of six areas of special focus. In our adolescent health work, AMCHP is developing strategies to address health equity, specifically adolescent reproductive/sexual health disparities. AMCHP will field a survey to help learn about state-level efforts planned or underway by its members that focus on adolescent reproductive/sexual health disparities. Of particular interest is the priority or attention given to disparities in each state and ways to build members’ capacity around this issue. Please contact [Sharron Corle](#) via email for more information.