

**Testimony to the Committee on Health and Human Services  
For the Performance Oversight Hearing on the Department of Health**

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Good morning Chairwoman Alexander and other committee members. Thank you for the opportunity to testify today. My name is Aurora Muñoz. I'm the Reproductive Justice Program Manager at the Young Women's Project, a multicultural organization that builds the leadership and power of young people so that they can shape DC policies and institutions to expand rights and opportunities for DC youth. Since 1994, YWP has been implementing after-school and classroom based programming on leadership, civic engagement, and health education, and has implemented programs in most DCPS high schools.

I am here to testify on some of the new developments in implementing the Youth Health Educator Program (YHEP), which, with your support, has employed hundreds of DC youth as peer educators. I would also like to offer some recommendations.

At YWP, I manage the Peer Health and Sexuality Education Campaign (PHASE), a youth-adult partnership that works to improve DC teens' reproductive health by expanding comprehensive sexuality education, ensuring access to community based services, and engaging teen women and men as peer educators and decision makers. In 2013, we created the YHEP, which employs young women and men in DC high schools. YHEP is building a city-wide network of well-trained, productive youth educators who have reached thousands of peers with school-based education, health resources, and condom distribution. Youth Educators receive extensive training in sexual health and HIV prevention, peer education, adult-youth partnership, data collection -- as well as -- work readiness, college prep, and academic strengthening. These part-time jobs result in a minimum of \$1,000 in school year wages, which can help youth with school needs, and household needs.

Working with youth from 11 DC Public High Schools (Wilson SHS, Luke C. Moore, Eastern SHS, Woodson SHS, Coolidge SHS, Roosevelt SHS, Columbia Heights Educational Campus, Cardozo Educational Campus, School Without Walls, Anacostia SHS, Dunbar SHS), YHEP has engaged 200 health educators who have distributed 51,602 condoms, and 314 dental dams, have conducted 15,374 sexual health education sessions with 5,499 individuals, and have referred 370 youth to school and community clinics.

We have many people to thank for this work. I would like to commend HAHSTA (HIV/AIDS, Hepatitis, STDs and Tuberculosis) Director Michael Kharfen for encouraging this work, and Veronica Urquilla, STD Education and Outreach Manager, for working diligently on a Youth Sexual Health Plan, which will support the work of DC's youth health educators. I would also like to thank the principals and administrators who open their doors to YWP's programming, and go above and beyond to encourage YWP's youth health educators. Mr. Turner at Eastern SHS helped recruit and manage Eastern's youth health educators. Mr. Edley at Woodson SHS is a strong supporter of reproductive health in his school.

In January, we expanded our work to include four Public Charter schools in wards 7 and 8, including Friendship Collegiate, National Collegiate Preparatory, Thurgood Marshall Academy, and Cesar Chavez. The interest from students at these schools has been overwhelming. We received 267 applications from these schools, and plan to hire at least 50 of these youth. This is generally what we average from all of the other 11 schools combined. Youth in these schools are committed to be engaged with work that can benefit their communities, and are eager for job opportunities. We wish we could hire them all. Unfortunately, with YWP's current capacity, we cannot. Although we are enthused about the eagerness of the students and quantity of applications for our program, we are concerned that youth in these schools and wards are rarely given the opportunity to work for the benefit of their communities, while earning valuable work skills, and money.

Last year, YWP testified before the Committee on Health about the need to continue to allocate money for this youth health educator stipend fund. With your support and help, Councilmember Alexander, DOH allocated \$157,000 for peer educator stipends. This contract has the option for extending the funding for 3 additional years. Ninety percent of this money will go directly to youth who are part of YWP's YHEP program and partner organizations who employ peer educators. In the past year, we have supported youth from other organizations, through the DC-Peer Educator Network, which YWP began in 2013. YWP has been giving organizations the opportunity to train their peer educators, and pay them through our DOH contract. We have supported the work of youth in the Office of State Superintendent Youth Advisory Committee, Promising Futures, and the Benning Terrace Collaborative (run by the Soloman Group and East River Collaborative). We also provided training to 20 youth at Benning Terrace. During the summer, YWP peer educators trained over 50 youth, and another 50 in October 2015.

With this contract and the support of Veronica Urquilla, YWP will pilot the Older-Youth Health Educator Program (O-YHEP). This program will employ disconnected youth ages 18-24 to work with adult staff and

other peers to give sexual health information, conduct referrals, and distribute condoms, and other safe sex materials in their communities. In January, YWP began to conduct outreach for this program. We have also held several rounds of interviews and will soon begin training youth. YWP has been working with youth in the Foster Care system and those experiencing homelessness for years, and will engage these youth, who are at higher risks for unplanned pregnancy and STIs, in this work.

While youth development, peer education, employment opportunities, and sexual health training remain at the core of YHEP, YWP also employs other strategies to facilitate youth reproductive wellbeing.

**STI Testing:** As part of YHEP, YWP partners with HASTA in order to promote the School-Based STD Testing at school sites. This year, YWP peer educators at Columbia Heights Education Campus, Dunbar SHS, Roosevelt SHS, and Eastern SHS made referrals to the STD test, handed out flyers, put up posters, and encouraged participation through their social media platforms.

**Youth Advocacy:** YWP also partners with our youth staff in order to move our policy and advocacy agenda. This year, YWP helped prepared 32 young people to give testimonies in 5 DC City Council oversight hearings. They have testified about the need to create more programs for teenagers in recreation centers, the need to engage students in school budget decisions, the need to provide young people with the right resources, tools, and skills to cope with mental health issues, and the need to strengthen academic resources, and the need to create more employment for youth and young adults, among other issues.

**Revising the DC Health Education Standards:** Since May 2014, we've been working closely with the DC State Board of Education (SBOE) and the DCPS Office of Teaching and Learning to redraft the Health Education Standards. As part of our contribution, we organized a Youth Health Working Group (YWG) that includes 12 youth ages 14-18 from many neighborhoods and attending six DCPS high schools. These youth designed, distributed, and collected surveys with 350 youth; completed secondary research in these areas; identified content and skill priorities in each area; received training on a range of sexual health issues, meeting facilitation, youth adult participation, presentation and meeting facilitation; conducted outreach with 10 organizations to recruit additional youth stakeholders; and prepared a presentation to educate adult Working Group members about the health issues youth are facing. They advocated for the inclusion of more extensive sexual health, mental health, nutrition, and violence standards. This group also developed testimonies to present at two SBOE public meetings. We are pleased to report that a draft of the new DC Health Education Standards will be up for a vote this April, and hope that the Committee

encourages a swift passage, intensive health teacher training and preparation, and an implementation that is accountable to students.

**Referrals and Clinic-Linkages:** In October 2015 YWP applied for a Community Health Administration grant (CHA\_TPP091815), which aimed to prevent unplanned teen pregnancy in wards 7 and 8, by linking adolescents to school and community health centers. In preparation for this award, YWP began to track referrals made by our youth health educators. Since November 2015, youth health educators have referred 370 youth to seek reproductive health services from organizations like Planned Parenthood, the Latin American Youth Center, Children's National Health Service, and Unity's school-based health centers. We have also partnered with Children's National- they have provided more in-depth training on long-acting reversible contraceptives (LARCs), and YWP has begun to use its social media presence to disseminate Children's reproductive health messages.

In December 2015, YWP received an award letter from CHA for this grant. YWP began to connect with high schools in Wards 7 and 8, and in February we began to recruit young people for this program, which we called the Teen Linkages, Education, And Prevention (Teen-LEAP). Much of this recruitment happened in DC Public Charter schools, as discussed above. Although this award was recently rescinded, due to CHA's lack of funding, YWP will hire these young people, and continue to collect referral data from our youth health educator program.

Overall, the Department of Health, and HAHSTA in particular, has been very supportive of our peer educators' work. I do have three recommendations on how to provide more assistance to youth health educators in the city:

**1) Continue funding the contract which was specifically designated for youth health educator stipends in the HAHSTA budget .** This contract helps DC in two ways:

- a. Youth deserve to receive a stable source of payment for their critical public health work to prevent STIs and unplanned pregnancies in DC. The District, as you know, has one of the highest teen pregnancy and STI rates in the country. We need all hands on deck to tackle these problems that plague our youth. Many studies have proven that peer education is a successful method to increase condom use among teens. You have heard our peer educators demonstrate the merits of peer education, and I would like to once again state that peer educators are a credible source of information for young people, serve as

positive role models, and produce greater attitude changes in adolescents' perception of personal risk.

- b. A continued investment in youth educator stipends not only saves the government money by decreasing the numbers of STIs and unwanted pregnancy in the teen population, but also creates a work-ready cohort of youth who will become contributing members of the city. Many of the youth who are interested in our program have great aspirations to help their communities through their future professions- especially in the health field. The health care industry is one of the biggest job creators in our country, and will continue to be so. In March 2012, it was reported that "despite the recent economic downturn, jobs in health care grew while jobs in other sectors declined. Between 2010 and 2020, jobs in the health care sector are projected to grow by 30 percent, more than twice as fast as the general economy" according to The Center for Health Workforce Studies. DC should be supporting programs that foster an interest in this field, and prepare youth to become a part of it, like the youth health educator program.
- 2) **Allocate funding for the Community Health Administration's School-Based Teen Pregnancy Prevention Programs, which should instruct School-Based Health Centers and Community Health Centers to collaborate with Youth Health Educators.** Youth Health Educators are an invaluable asset to these health centers. They could promote services while doing peer education, providing accurate information about what students need to enroll, ensuring students about their right to obtain confidential services, and encouraging students to use health center reproductive health services like STI tests, pregnancy tests, and contraceptives. This work can lead to more youth seeking health services of all kinds, and encourage medical homes to cater to the needs of youth.
  - 3) **Create programming that directly benefits, engages with, and employs youth in schools with high pregnancy rates, and few extracurricular opportunities.** Often, youth from the most academically rigorous schools, with the most resources, are selected to be part of afterschool enrichment programs, while students from schools in wards 7 and 8 are neglected. In order to make the most headway with teen pregnancy, youth from these wards need to be directly involved in, and compensated for reproductive health work.

Thank you for this opportunity to testify. We are happy to serve as a resource to the Committee in any way we can.