

**Testimony to the Committee on Health
For the Budget Oversight Hearing on the Department of Health**

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Good afternoon Chairwoman Alexander and members of the Committee on Health and Human Services. Thank you for this opportunity to testify. I am Nadia Gold-Moritz Executive Director of the Young Women's Project (YWP) -- a DC-based nonprofit organization that builds the leadership and power young women, so that they can shape DC policies and institutions to expand rights and opportunities for DC youth. Since 1994, YWP has developed thousands of youth leaders and has worked in partnership with a number of DC agencies to develop policy and implement programs in sexual health education and services, foster care rights and opportunities, and other issues. YWP programs cover a broad range of interventions -- from after school leadership programming to youth employment, peer education, youth-led research, and policy development. Our work with foster and homeless youth (through the Foster Care Campaign) engages more than 30 foster and homeless youth leaders who work to improve the lives of their peers through advocacy, education, and policy work. I am here today to ask for your support in three areas -- all will contribute significantly to the positive health outcomes and responsible sexual health decision making of youth in DC public and charter high schools.

Through our Youth Health Educator Program, now in its third year, YWP has trained and managed more than 200 youth educators who work in partnership with DC Public Schools and the Department of Health (DOH) to improve sexual health outcomes for DC youth through peer education, condom distribution, and by expanding sexual health education. We started with six schools last year, expanded to 12 this year, and have employed 93 youth educators during the past year. Last year these youth distributed 13,000 condoms and conducted 4,000 educational interventions. So far this year, they distributed 14,000 condoms, and conducted 6,000 education sessions. These youth also trained 150 health teachers, collected data from more than 500 youth on health, violence, education, and other issues, cultivated more than 200 relationships with administrators and teachers in DC public and charter schools, made significant contributions to the DC Health Education Standards, and presented more than 40 testimonies to five Council Committees.

YHEP aims to build 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. Targeting the most under-resourced youth from 21 DC Public and 10 Charter High Schools, YHEP will expand next year to include 250 youth (125 hired through YWP and 125 hired through Community Partners). Youth are recruited, trained, and developed as health experts and educators by community based partner organizations who would also manage youth education and condom distribution work at one or more school sites. Youth Educators receive extensive training in sexual health and STI/HIV prevention, peer education, training, counseling, facilitation, adult-youth partnership, project development, data collection, and physical and mental health -- as well as -- work readiness, college prep, and academic strengthening. They also have part time jobs -- resulting in a minimum of \$1,000 in school year wages.

In order to recruit and support YHEP youth, in June 2014, YWP launched the DC Peer Educator Network (DC-PEN) to connect and support community based organizations working in partnership with youth who are committed to improving youth health outcomes. We have 12 active members (including 9 CBOs and 3 government agencies) who together have established common goals and peer educator standards, meet regularly to track progress and share information, collect network-wide data, and work together to conduct youth training institutes. As the

facilitating organizations, YWP provides in-kind support for youth wages-stipends, access to curricula and youth training tools, and technical assistance.

I am here today to ask for your support on three issues:

First, YWP is requesting that the Committee allocate \$157,000 within the Department of Health (DOH) FY2016 budget to support the stipends of 250 youth educator positions in 31 DC Public and Charter High Schools. Together these youth will educate 20,000 youth in sexual health and distribute 50,000 condoms. Thanks to you and your support last year -- YWP has provided stipends to more than 140 youth educators in more than 18 public and charter high schools. YWP employs about 100 youth; 40 are paid through partner organizations including Whitman Walker-MetroTeen AIDS, OSSE's Youth Advisory Council, and Promising Futures. Youth educators work 4-6 hours a week, receive a stipend of \$7.25 an hour, and receive more than 50 hours of training in reproductive health, peer education and training, work readiness, project development, data collection, educational strengthening, self advocacy, and other issues. The unplanned pregnancy rate for the youth in this program is zero. To implement this work, YWP works very closely with HIV/AIDS, Hepatitis, STDs and Tuberculosis Administration (HAHSTA) staff, especially Director Michael Kharfen and Veronica Urquilla. HAHSTA supports YWP's administration of the peer educator stipends through a contract; 90 percent of the contract funding goes directly to youth educator stipends.

This work is significant on three levels. First, we are employing 200 youth who need jobs. Part time jobs for youth, especially those that include training and support, are rare. YHEP will employ more youth this year (200) than DOES employed through its in-school program last year (123). Next, these educators are making a significant school-level impact regarding condom use, sexual health decision making, and resource referrals. DC youth continue to face urgent health challenges. According to the latest Youth Behavioral Risk Survey (YRBS) data, more of our youth ever had sexual intercourse (54 percent compared to 47 percent nationally) and are starting earlier (15 percent had sexual intercourse before age 15 compared to 6 percent nationally) and having sex with more partners (22 percent of DC youth had sex with more than four partners compared to 15 percent nationally). And although they report using condoms in high numbers, they are also contracting STIs in high numbers. Finally, many youth don't know about the school-based sexual health services available to them. In a 10.14 YWP survey taken by 839 youth in 6 DCPS high schools in October 2013, only 28 percent knew condoms were available for free in their school.

We would like to see the high school nurse contract amended to expand the scope of services to include STI and pregnancy testing, and are asking that you make this recommendation as part of the Committee Report. School-Based Health Centers provide full reproductive health services, including STI testing, and pregnancy testing, however, schools without SBHCs should also provide DCPS students with these services. Youth need and want to be able to access testing through the nurse's office year round. More than 90 percent of youth in a recent YWP survey said they would access these services. HAHSTA has offered to train the nurses, provide the testing equipment, pay for the laboratory testing and contact the students on results. We were told by the School Health Division Chief for the Community Health Administration (CHA) that the School Health Program is undergoing planning to use the *Whole School, Whole Community, Whole Child* model for school health services and that a new RFP will be released (at an unknown date) when this planning process is complete.

Currently, HAHSTA conducts STD testing once a year at each DCPS high school. However, teens need to be tested more often in the year. The Department of Health recommends that sexually active people should get tested at least once every 6 months and within three months following a positive test. Additionally, HAHSTA reportedly saw a steep decline in the number of youth screened for STIs through outreach programs. Having worked in the schools during STI testing, YWP knows that there are significant challenges to testing all youth during a brief

period- student absenteeism, lack of teacher support, and last minute cancellations all can affect these numbers. For this reason, it would be beneficial to have an onsite employee that could administer these tests year-round. Students could take tests at more convenient times in their schedules, and if they missed the annual testing period because of being absent, they could always take the test at another date. This program would help pregnant teens explore their options early, and be linked to prenatal care and other pregnancy services that DOH offers.

Finally, we urge you to fund the Teen Pregnancy Prevention Fund Establishment Act of 2014 again this year. As you know, through a competitive grant process, the Fund provides grants to programs focused on reducing unplanned pregnancy including health services for teens, reproductive health education, professional development and training, research and policy development, and public education awareness. Although teen pregnancy rates are at the historic low of 49 pregnancies per thousand girls 15-19 years city wide, births in wards 7 and 8 have smaller increases and currently account for more than half of all births to teens in the city. Foundation funding for teen pregnancy work has decreased significantly in the past two years. This Fund goes a long way to fill the gaps in funding and programming.

Thank you for this opportunity to share our work and recommendations. I am happy to serve as a resource to you and your staff in whatever way I can.