Nashville's Mayor, Bill Purcell, kicked off the CityMatCH 2001 Urban Maternal and Child Health (MCH) Leadership Conference at the Millennium Hotel in Nashville, TN. Held August 26-29, 2001, the theme of this year's conference was: “Moving Women's Health Center Stage.” Mayor Purcell welcomed participants to the City of Nashville, recognizing women's health efforts at the local Nashville-Davidson County Metro Health Department, and highlighted local successes. (Related story on page five.)

Through an effective mix of pre-conference and skills-building workshops, site visits, plenaries, and the annual CityMatCH Business Meeting, conference participants were energized and eager to continue their work to enhance health outcomes for women, children and families in their communities.

Emily Friedman, an independent health policy and ethics analyst based in Chicago, IL offered a framework for the entire conference in her opening plenary: “Setting the Stage for Women's Health.” (Related story on page two.) Her lively, information-packed style led the way for concurrent workshops and later plenaries. Ms. Friedman also moderated the federal plenary, “Women's Health – Front & Center.”

Deborah R. Maiese, Director, Office of Women's Health, Health Resources & Services Administration, Rockville, MD introduced two federal level champions of women's health: James S. Marks, Director, National Center for Chronic Disease Prevention & Health Promotion, Centers for Disease Control & Prevention (CDC), Atlanta, GA and Peter C. van Dyck, Associate Administrator for Maternal & Child Health at the Health Resources & Services Administration, Rockville, MD. (Related story on page three.)

Henry Foster, Vice-Chair of the Nashville-Davidson County (TN) Board of Health, Adolescent Pregnancy Prevention Program offered the closing plenary as he took a close-up look at “Women's Health Care in the Twenty-first Century.” (Related story on page four.)

Pre-conference workshops enhanced participants' skills around the use of data, data use in Geographic Information Systems, and community health planning tools, among others. Concurrent skills-building workshops strove to enhance participants' knowledge base, and to develop skills for action on key women's health issues, from developing a better understanding of the political framework and addressing racial and ethnic disparities, to preventive health across the lifespan, and the reduction of domestic/family violence.

This 12th CityMatCH MCH Leadership Conference provided a unique forum for networking, information gathering, and meeting colleagues from local health departments as well as our federal partners.

New Phone Numbers at CityMatCH Central Office

Effective immediately, new phone numbers will connect you to the CityMatCH offices. The old numbers will still be forwarded for several months, but we suggest you begin using the following numbers right away:

Office (402) 561-7500
Fax (402) 561-7525
A woman is more than a reproductive function, more than a source of sexual pleasure, more than a raiser of children.

- Friedman

Closing Remarks

'The pebble has been dropped into the pond, and the ripples are spreading.' - Participant Pearl
Women’s Health - Front & Center

During the Annual CityMatCH Conference, James Marks, MD, MPH, Director of the National Center for Chronic Disease Prevention and Health Promotion at the CDC, and Peter van Dyck, MD, MPH, Associate Administrator for Maternal and Child Health at the Health Resources and Services Administration responded to key questions during a panel discussion. Excerpts of their comments follow:

**What is the single greatest challenge in terms of preventing disease and enhancing the health of women? What is the greatest opportunity?**

**Peter van Dyck:** We have to help people understand that we really are interested in serving women across the lifespan and that we have a desire to serve them. Integrating the services that we already provide with women across the lifespan lends support to the services we have been monitoring. Serving young women through middle age and preventing problems that happen later on are the greatest opportunities that we currently have.

**James Marks:** The biggest challenge relates to the fact that at the time of Feminism and the women’s equal rights movement, there was a conscious separation of that movement from the reproductive role because they did not want to be narrowly defined. That remains a challenge for those of us who are embracing women’s issues holistically and more fully with the women’s health movement. This is also the biggest opportunity. There is a reconnection that is ready to go on now that the women’s equal rights side has matured and is standing on its own. Women have moved to a better place in society. They are more willing to embrace this as a fundamental part of women’s health.

**How do you see the partnership between the federal government and the state, city and county health departments evolving in the next two to three years?**

**Peter van Dyck:** One of the things that states and cities ask most about women’s health is “What is women’s health?” How do we define women’s health? What constitutes a program for women’s health at a city, state or county level? It is a partnership in defining women’s health. There will be new partnerships formed with the new administrations. Congress appears to have some desire to fund programs in that area.

**James Marks:** There is going to have to be greater energy focused at the local level, and that means a greater chance for experimentation.

It also means greater local advocacy, because at that point, the federal government’s role can be more supportive of what is going on at the local level. The challenge is that if we don’t know what we are working on; it will be difficult to present a case well. We’re not going to show effectiveness when we’ve got something to present. It is very important to measure and define goals.

"I enjoyed listening to HRSA/CDC keynote speakers, understanding the mission and goals and the importance of the Women’s Health agenda to MCH." - Participant Pearl

The innovative inclusion of Federal Roundtable Discussions gave all participants a unique opportunity to meet with key representatives from divisions of Health and Human Services: the CDC, the Health Resources & Services Administration (HRSA), and the Maternal and Child Health Bureau (MCHB). Facilitators included: Hani K. Atrash, MD, MPH, Chief of the Pregnancy & Infant Health Branch in the Division of Reproductive Health, CDC; Jennifer Ballentine, MPH, a Program Analyst in the Division of Reproductive Health, CDC; Jose Cordero, MD, the Acting Director of the National Center for Birth Defects & Developmental Disabilities, CDC; Carol P. Galaty, Director of the Office of Program Development at HRSA/MCHB in Rockville, MD; Lisa King, MA, Women’s Health Specialist located at the Office of Women’s Health at HRSA/MCHB; and Sherry O’Rloff, MPH, an Epidemiologist at CDC’s National Center for HIV, STD & TB Prevention. Conference participants who availed themselves of these discussions made extraordinary personal connections with our federal partners.
HENRY FOSTER, M.D., is the Vice-Chair of the Nashville-Davidson County (Tenn.) Board of Health, Adolescent Pregnancy Prevention Program. He is also Professor Emeritus and former Dean of the School of Medicine, Meharry Medical College and Clinical Professor, Obstetrics and Gynecology, Vanderbilt University. Foster recently spoke at the Urban MCH Leadership Conference in Nashville. Excerpts follow.

I congratulate CityMATCH for convening your conference, “Moving Women’s Health Center Stage.” This theme demonstrates your proactive approach to problem solving and your vision.

Access to first-rate maternal and child health services is absolutely essential for quality health care outcomes whether for the citizens of Tennessee or for the nation. The value, and the necessity of health as a requisite for productivity, has been long recognized. Herophilus, physician to Alexander the Great, in 325 B.C. said, “When health is absent, wisdom cannot reveal itself; art cannot become manifest; strength cannot fight; wealth becomes useless, and intelligence cannot be applied.”

As health care providers, we must always strive to lower risk factors while increasing the quality of health services we provide. An appreciation of the public health approach to solving health problems is essential to maximize good outcome and cost efficiency. Increased life expectancy has occurred mainly through the public health system. “The great enemies of death and disease in the modern world have been sanitation, pasteurization, chlorination, refrigeration, soap, diet, and the high standard of living.”

The U.S. ranks 19 among industrialized nations in life expectancy. Decreasing infant mortality is one of the surest ways to increase life expectancy. Heart disease kills almost seven times more women than does breast cancer each year. In minority communities, heart disease, hypertension, stroke, and diabetes are particularly severe. Cancer is the second leading cause of death among American women. AIDS is a major cause of death for women in the age group 25-44 years. As a result of perinatal transmission, AIDS is a leading cause of death among Hispanic and black children. Major depression is more common in women, and treatment is critical, since the leading antecedent of suicide is depression.

Domestic violence affects three to four million women each year; some 170,000 women are assaulted in their fifth to ninth month of pregnancy. The U.S. teen pregnancy rate remains four times higher than Germany and France. Each year, six million women in America, half of whom are teenagers, acquire a sexually transmitted disease.

What interventions can we apply to close the gender disparity in health access and outcome? First, we must be absolutely clear as to what our medical interventions can and cannot actually accomplish.

The CDC believes that, of the 10 leading causes of death in the U.S., only 10% of premature morbidity could have been avoided through improvements in access to medical treatment. 20% of premature morbidity resulted from the environment, 20% from human biology, and the final 50% resulted from adverse behaviors. Medical interventions alone will never be sufficient to adequately improve health care.

Many of the underlying causes of disability and disease are preventable, and public health interventions can reduce or prevent these conditions from occurring.

We have the best health care providers and facilities anywhere. People come to America from around the globe to be the beneficiaries of this expertise. Yet, health care outcomes for our own citizens are substandard when compared to other western nations.

The magnitude of our challenge is prodigious, but, to relate another of my favorite quotes, “Nothing in this world can take the place of persistence. Talent will not; nothing is more common than unsuccessful men with talent. Genius will not; unrewarded genius is almost a proverb. Education will not; the world is full of educated derelicts. Persistence and determination are alone omnipotent. The dog ‘press on’ has and always will solve the problems of the human race.”

Calvin Coolidge’s words are applicable to the task that faces us in providing health care for America’s women in the 21st Century.
On Tuesday, August 28, six local organizations opened the doors to their offices for CityMatCH Conference attendees. This annual Conference opportunity gave participants a chance to see community health in action, and take new ideas and strategies back to their jurisdictions. The following sites shared their models:

Project SHARE: SHARE Mothers Program. Counseling, support, transportation and case management for HIV/AIDS infected or at-risk pregnant women, mothers and their children. Share Mothers offers training in HIV risk assessment and cultural competency with a focus on African Americans and Hispanic minorities.

Park Avenue Enhanced Option School. Year-round Metropolitan School serving Pre-K through 4th grade. Mental Health.

Counseling services including visits by a psychiatrist, a primary care clinic staffed by a pediatric nurse practitioner, and an adult community education center are provided.


East End Women's Health Birth Center. Complete network of maternity and women's health services including women's health care, pregnancy testing, prenatal care, ultrasound, education, attentive care during labor and birth with the very best nurse midwifery care and medical expertise.

Metropolitan Health Department of Nashville and Davidson County. Local government agency primarily responsible for protecting and promoting the health of county residents and the thousands of others who work, shop, and play in Nashville every day. STD FREE; Head Lice Puppet Show; school health programs, women's health, and health promotion activities, such as oral health were showcased.

Success by 6 Mobile Van. Administered by the health department. Used to identify and screen young children throughout the county and address developmental needs. The van offers physical exams, hearing, speech/language, dental, vision, developmental needs, and behavioral screenings.

Success by 6 Mobile Van

Nashville's Health Director, Stephanie Bailey addresses conference site visitors

The Tooth Fairy "Brushes a Few Teeth"

Instructors offer cooking classes to individuals at the Nashville-Davidson County Metropolitan Health Department

NASHVILLE HIGH SCHOOL CHOIR
Entertains and Inspires

Youth representing a local Nashville, Tennessee high school preceded Henry Foster's Closing Plenary. In a program which brought participants to their feet, the young singers showcased a composition written locally, and closed with the inspirational hymn, "Total Praise." We thank them for their participation at the 2001 Urban MCH Leadership Conference and wish them every success.

"I found the workshops beneficial to my role in CityMatCH/DUI, my work in child care consultation and as a graduate student."

This was my first CityMatCH conference, and I learned a great deal, as I had hoped. I look forward to the next Conference with great anticipation."

- Participants' Pearls

Nashville, Tennessee

Local MCH - Community Health in Action
Orienteering in Music City

Think you know all there is to know about CityMatCH, DUI, teamwork or line dancing? The three-step approach required of each Navigation Team assured that a little more learning and networking occurred, all done in a spirit of fun. Teams found each other at the opening breakfast’s "Cast Call" and the Welcome Reception. The Navigation form which they completed and returned as a team to the Wednesday morning business meeting assured that participants got to know a bit more than if they simply attended the Conference passively. Team response was a remarkable 100%, and compasses were awarded to the Navigation Team who returned the correct completed form first. Congratulations to all who participated!

Business and a Little Music

Before the close of the Annual Conference, CityMatCH held its Annual Business Meeting. Designed as an opportunity for shared learning, for recognition of special award recipients, and to celebrate the work done in public health each day, the meeting offered a mix of experiences.

Participants had the floor, raising questions about hot MCH topics, and connecting with others who had knowledge and experiences to share. These connections foster learning that continues back home as participants reconnect and work together to solve problems.

CEO Magda Peck tied the threads of the various capacities of CityMatCH together through her visual and spoken presentations in a way that brought clarity and cohesiveness. Awards were presented to staff and to the winning Navigation teams. (See related stories.) Songs were sung to traditional melodies, with lyrics relevant to the work that members do. Always a highlight of the annual Conference, this year's business meeting was no exception, energizing, educating and inspiring participants.

Board of Directors Elects 2001-2002 Executive Committee

At the fall meeting of the CityMatCH governing Board, the following consensus slate was elected for the 2001-2002 term:

- Carole A. Douglas (Lincoln, NE) Chair
- Zenobia Harris (Little Rock, AR), Vice-Chair, Capacity Building Action Group
- Virginia Bowman (Pittsburgh, PA), Vice-Chair, Infrastructure Action Group
- Lawrence Sands (Phoenix, AZ) Vice-Chair, Policy Action Group
- Betty Thompson (Nashville, TN) Immediate Past Chair
- Magda G. Peck, ScD remains as CEO & Executive Director.

Under CityMatCH bylaws, the outgoing Board of Directors elects the Executive Committee for the incoming Board, who begin their governance at the annual business meeting.

The CityMatCH CityLights newsletter is produced and published quarterly through a cooperative agreement (#SU 93M C00120-10) with the Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services.
SPOTLIGHTS SHINE BRIGHTLY IN MUSIC CITY

The annual National March of Dimes Birth Defects Foundation Reception, hailed as the “CityMatCH Family Reunion,” provided plenty of networking opportunities, and a display incorporating photographs and memorabilia from all previous Conferences.

Karen Waldrop, Senior Field Program Director for the March of Dimes - Southern Regional Office, shared her perspectives on the history of the CityMatCH/March of Dimes Partnership for Mothers and Babies and her hopes for future connections. The MOD sponsored the Annual SPOTLIGHTS Networking Reception, a highlight of every Conference.

The submission of a written profile describing an MCH program is an annual requirement for member health departments attending the Conference. These profiles are judged by a panel of their peers, and the programs which best meet the criteria are awarded SPOTLIGHTS recognition.

Zenobia Harris, CityMatCH Board member and Patient Care Leader - Central Region of the Arkansas Department of Health, presented 2001 SPOTLIGHTS Awards to three health departments whose profiles best met the criteria for Alchemy, Most Replicable and Most Innovative. Jamie Roques accepted the Alchemy Award for the Baton Rouge (LA) Parish Health Unit; Deb Hendricks brought back the Most Innovative Award for the St. Paul-Ramsey County (MN) Department of Public Health; and Gayle Bridges Harris accepted the Replicability Award for the Durham County (NC) Health Department.

Ed Ehlinger Award
Presented to Bill Sappenfield

Bill Sappenfield, CDC MCH Epidemiologist, recently reassigned from CityMatCH to Atlanta, was presented the Ed Ehlinger Award at the annual CityMatCH Conference in Nashville. Ed Ehlinger was an early champion of CityMatCH, and served as the first Board Chair.

Magda Peck shared Dr. Ehlinger's remarks with the group: “I am pleased and honored that you are receiving this award. Pleased because you deserve to be recognized for your effective and tireless efforts to improve the health and well-being of all families and children. Honored because your status and stature in public health adds to the eminence of your worth. Your contributions have made this world a better place. You deserve the Ed Ehlinger Award and the heartfelt thanks of all the MCH professionals we serve.”

In receiving his award, Sappenfield said, “CityMatCH is like my family; you are people who really value your skills and what you do. I have never worked with a finer group of MCH people, that have hearts for women and children, to make their lives better...thank you all very much.”

First Staff Award
Presented to Patrick Simpson

Peter J. Morris, At-Large Representative to the CityMatCH Board and Medical Director/Policy Director for Wake County Human Services, Raleigh, N.C., presented the Board’s first Staff Award to Patrick Simpson, CityMatCH Program and Policy Manager, during the annual Business Meeting held at the Conference. Morris and other Board members composed and dedicated new lyrics in a special song to Pat in honor of his service to CityMatCH. Congratulations, Pat.

CityMatCH Welcomes New Staff

CityMatCH recently welcomed two additions to the Central Office. Jeff Rabey came on board in late October as a project coordinator, supporting the National Data Use Institute and the Regional Data Use Academy. Rabey received his MA in Health Education from the University of Iowa.

In late August, Jane Kanchense, a doctoral student in Community and Preventive Health at the University of Nebraska Medical Center, began assisting with the Perinatal Periods of Risk Initiative. She holds a masters degree in Health Promotion and originally hails from Zimbabwe, Africa. Welcome, Jane and Jeff.
 "The continued, widespread, sometimes institutionalized mistreatment of women, in this society and in this health care system, constitutes a challenge, indeed a threat, to the democratic ideals we claim to honor as a society."
- Emily Friedman, BA
Independent Health Policy & Ethics Analyst

"Medical interventions alone will never be sufficient to adequately improve health care."
- Henry Foster, M.D., Vice-Chair
Adolescent Pregnancy Prevention Program
Nashville-Davidson County Health Department

"And who is the MCH population? The MCH population includes women of reproductive age, fathers and children with special health care needs. This is a change."
- Peter van Dyck, M.D., M.P.H
Associate Administrator for MCH, Health Resources & Services Administration

2001 Conference Co-Chairs:
Gayle Bridges Harris, Durham, NC
Llamara Padro Milano, Syracuse, NY

2001 Host Health Department:
Nashville-Davidson County Health Department, Nashville, TN with the generous assistance of Betty J. Thompson, RN, MSN, Director of Health Access & Assurance and 2000-2001 Chair, CityMatch Board of Directors, and Stephanie Bailey, M.D., M SH SA, Nashville Davidson County Health Department Director.

2001 Conference Joint Sponsors:
Association of MCH and Child Health Programs (www.ammch.org)
Association of State and Territorial Health Officials (www.astho.org)
Association of Teachers of MCH and Child Health (www.amch.org)
Council of State and Territorial Epidemiologists (www.cste.org)
Grantmakers in Health (www.gh.org)
Maternal and Child Health Section of APHA (www.geocities.com/~jpsangio/mch/)
National Association of County and City Health Officials (www.naccho.org)
National Center for Education in Maternal and Child Health (www.camch.org)
National Fetal-Infant Mortality Review Program (www.acog.org)
National Governors Association (www.nga.org)
National Healthy Start Association (www.healthystartsassociation.org)
National League of Cities (www.nlc.org)
United States Conference of Mayors (www.usmayors.org)
Washington Business Group on Health (www.wbg.org)

2001 Funding Partners:
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2001 Conference 2001 “Moving Women’s Health Center Stage” was made possible by:

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