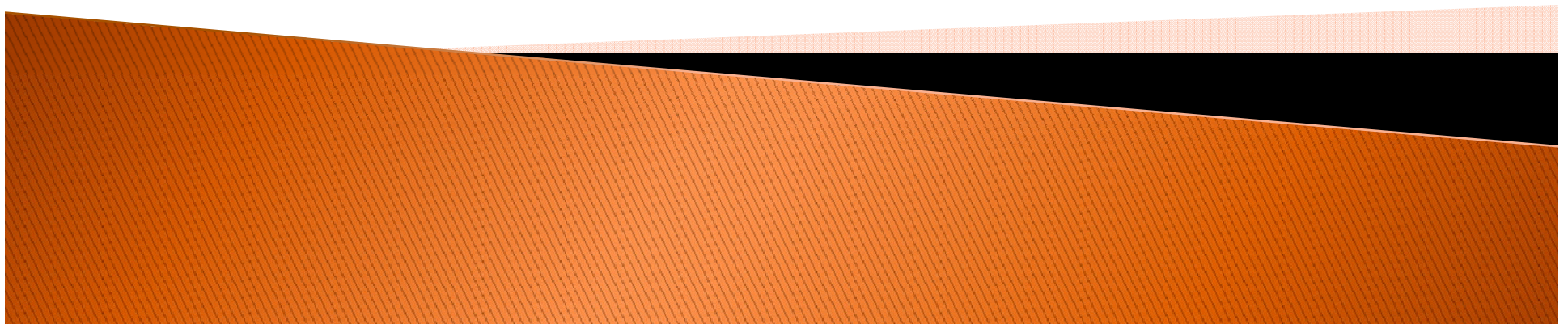


National Health Collaborative on Violence and Abuse

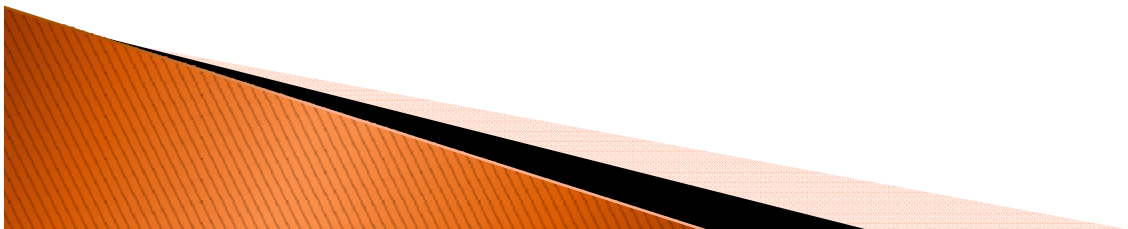
Webinar: June 17th, 2010



National Health Collaborative on Violence and Abuse

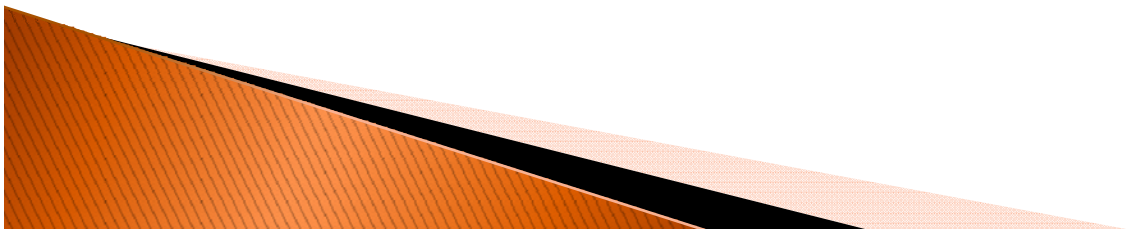
History, Members and Focus

- AMA National Advisory Council on Violence and Abuse (1992 – 2009)
- 30 to 35 medical societies and other concerned health focused organizations
- NHCVA is the only independent health focused organization of organizations dedicated to advancing the nation's efforts to prevent and to address the health harms of violence and abuse.



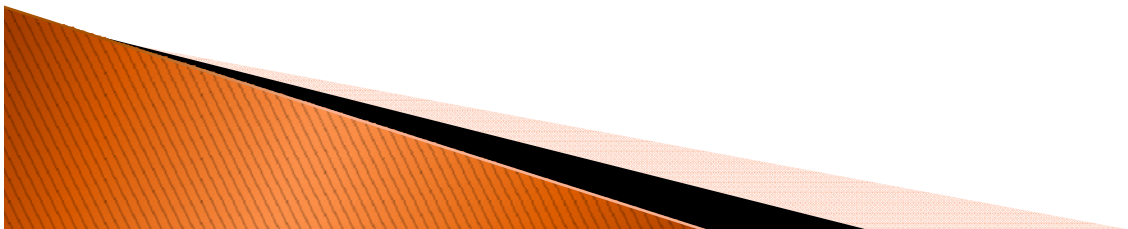
NHCVA Mission

- Advance health policy related to violence and abuse at the state and federal level.
- Improve health professionals' and health systems' capacities to prevent and to address the harms of violence and abuse.



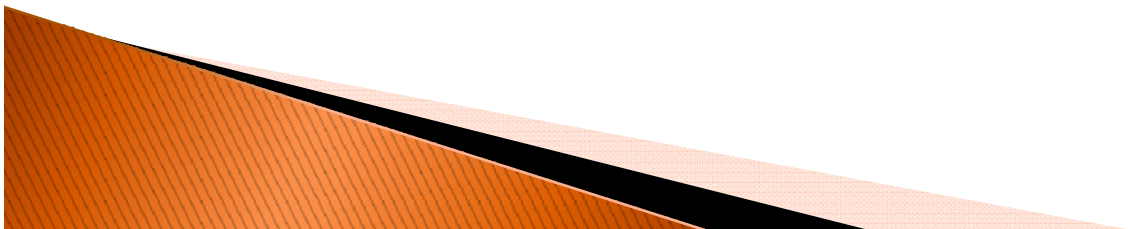
NHCVA Activities

- Phone/web meetings every other month
- Legislation, research and policy analysis related to violence and abuse
- Congressional briefings on the impact of violence and abuse and health
- Education and information sharing between member organizations
- Annual meeting of liaisons and member organizations' staff



NHCVA Organizational Structure

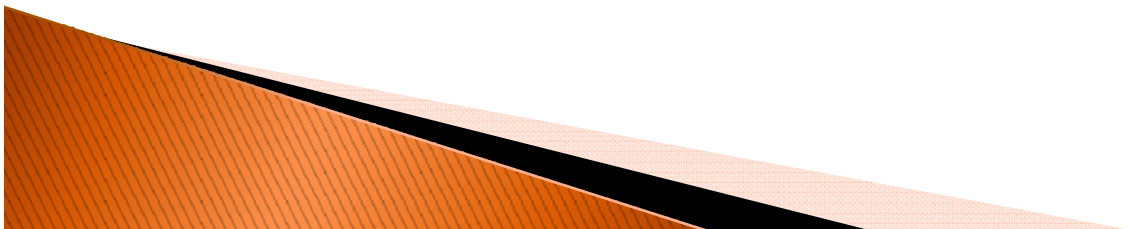
- ▶ The Family Violence Prevention Fund currently serves as NHCVA's fiscal agent, provides senior level staff and administrative support and facilitates phone and web conferences.
- ▶ Questions about the Goals, Mission and Structure of NHCVA?



National Health Collaborative on Violence and Abuse

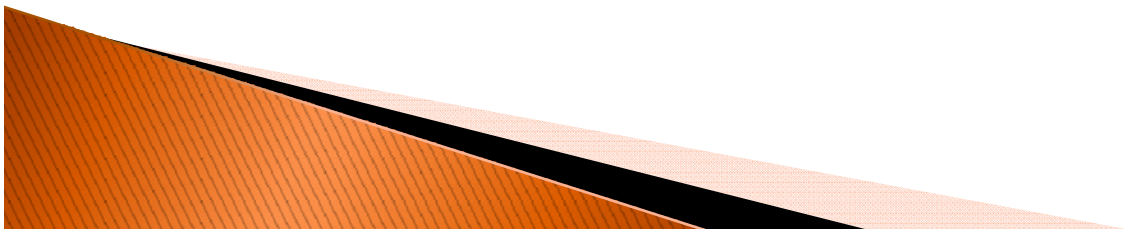
Participation:

- ▶ Invite you to join in the Collaborative by designating a staff member to participate
- ▶ Administrative and/or financial support beyond support for liaison's participation welcome but not required
- Inform the long term direction of collaborative



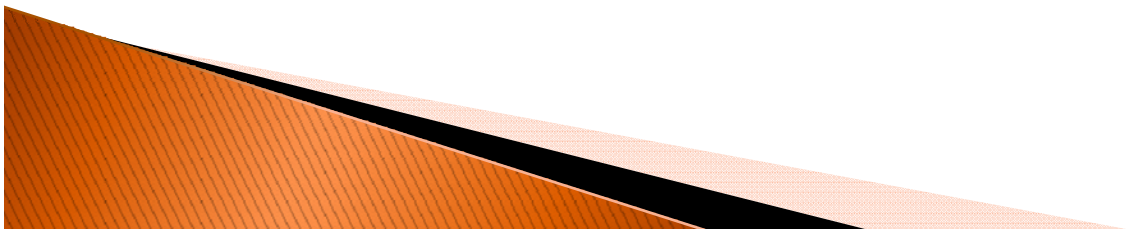
Health Reform and Violence Prevention:

- ▶ Insurance discrimination against victims of abuse
- ▶ New funds for maternal, infant, and early childhood home visitation programs
- ▶ Women's Health Amendment – Well Woman Visit
- ▶ State funding for teen pregnancy prevention
- ▶ Services for pregnant and parenting victims
- ▶ Prevention investments



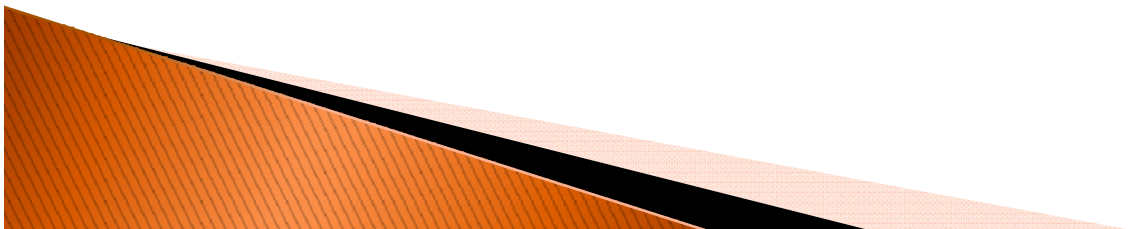
Home Visiting Programs

- ▶ Health reform amended Title V of the Social Security Act to add funding for home visiting programs.
- ▶ Current appropriations to federal HHS is \$1.5 billion in mandatory spending over five years
- ▶ Formula funding is based on the number of children in families with income at or below 100% of the federal poverty line as compared to the number of children nationally.



Home Visiting Programs (con't)

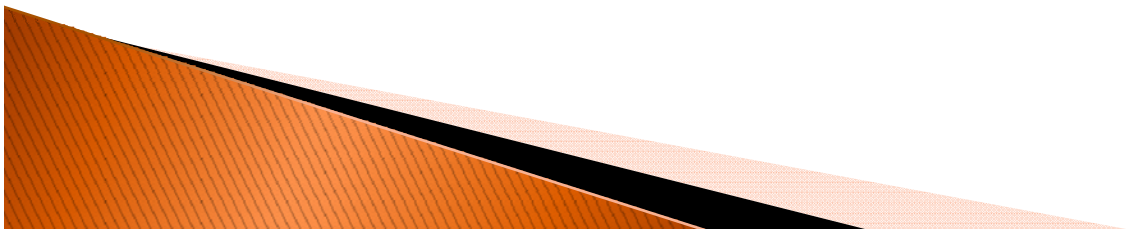
- ▶ The needs assessment should identify communities at risk and two risk factors specifically identified in the law are domestic violence and child maltreatment.
- ▶ The program must demonstrate improvements in multiple benchmarks including prevention of child injuries, abuse, neglect or maltreatment and the reduction in crime or domestic violence.



Home Visiting Programs (cont.)

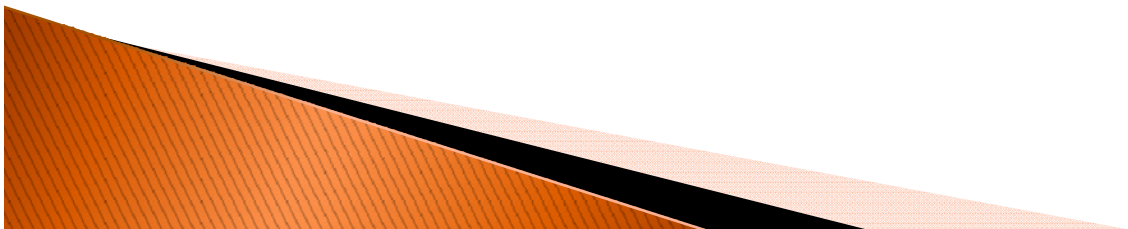
- ▶ 75% of funds must go towards evidence based service delivery models such as the Nurse Family Partnership
- ▶ 25% of funding to be used for a new programs which could address the needs of children and women exposed to abuse.
- ▶ AMCHP newsletter has a list of resources on home visiting and models, including report on model programs that effectively address lifetime exposure to abuse:

http://www.amchp.org/AboutAMCHP/Newsletters/Pulse/June2010/Documents/Pulse_June10.pdf



Women's Health Amendment

- ▶ In September, all plans must cover preventive health services, and plans cannot require cost sharing or deductibles for these services.
- ▶ These include women's preventive care recommended by USPSTF, but the new law also gave authority to HRSA to craft comprehensive guidelines for services not already supported by USPSTF.



Women's Health Amendment (cont.)

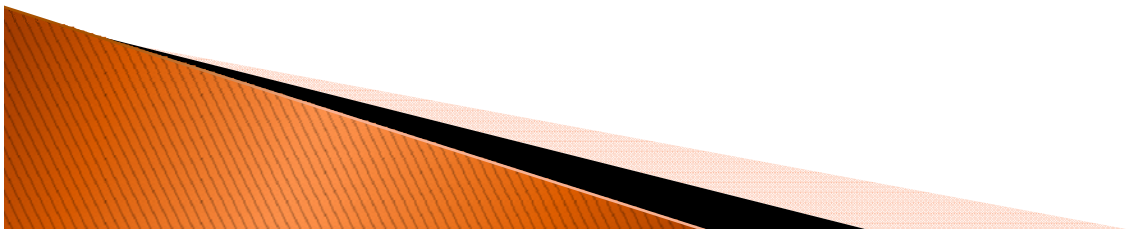
The new guidelines will address:

Women

- ▶ Well Woman visit (ACOG)
- ▶ Preconception visit (March of Dimes)
- ▶ Assessment and Counseling for Lifetime Exposure

Children

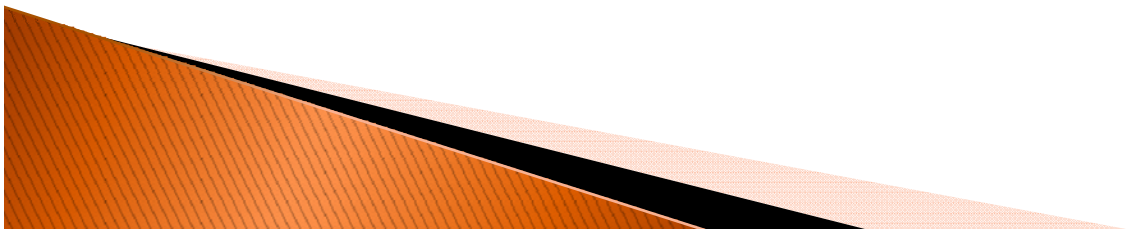
- ▶ Covers Bright Futures services for infants, children and adolescents



Preventing Youth Violence and Teen Pregnancy

Personal Responsibility Education Program

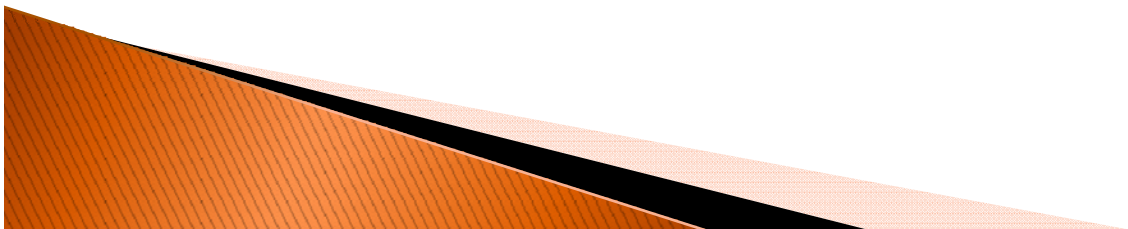
- ▶ \$75 million annually over five years in mandatory funding for evidence-based teen pregnancy prevention grants for states and tribes
- ▶ Educational programs must include both abstinence and contraception and three or more adulthood preparation subjects, including healthy relationships.



Preventing Youth Violence and Teen Pregnancy

Personal Responsibility Education Program

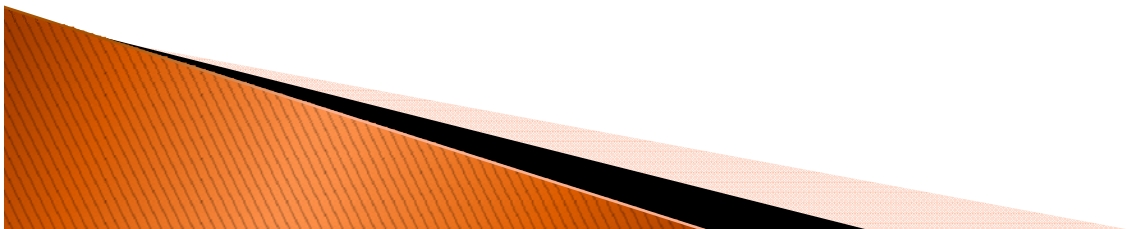
- ▶ Administered by HHS ACF
- ▶ Announcement expected later this month.
- ▶ State portion will be at the discretion of the state
- ▶ Eligible programs – 28 proven school and health based curricula with flexibility to adapt those programs



Training on DV/SA for Health Providers

Services for Pregnant/Parenting Victims

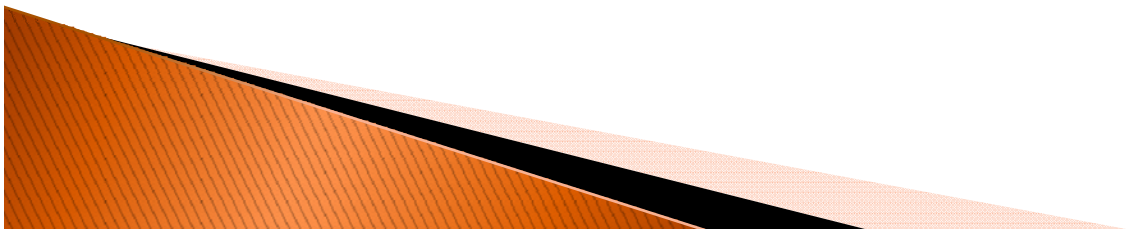
- ▶ \$25 million per year
 - Guidance at [cfda.gov/](https://www.cfd.gov/) (#93.500)
 - AG can apply to their States for intervention and social service support for victims and TA (including to health professionals)
 - HHS Office of Adolescent Health will administer



Prevention Investment

Prevention and Public Health Fund

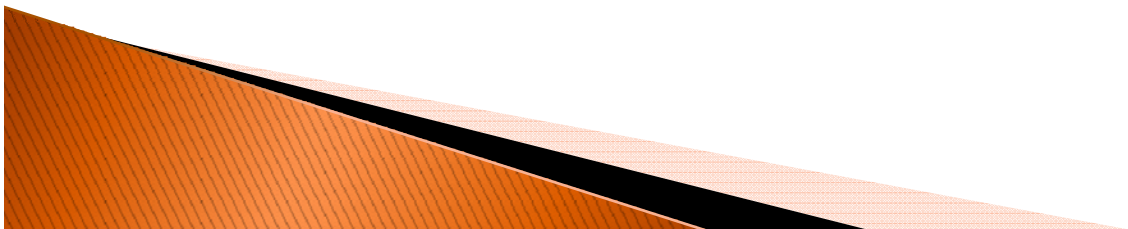
- ▶ \$15 billion to improve health and reduce health costs in the public and private sector
- ▶ \$500 million FY11 with \$250 million announced yesterday to increase primary care providers
- ▶ Political interest in guiding priorities next year
- ▶ Opportunity to shape the discussion on impact of violence and abuse on chronic health issues.



Prevention Investment (cont.)

National Prevention, Health Promotion & Public Health Council

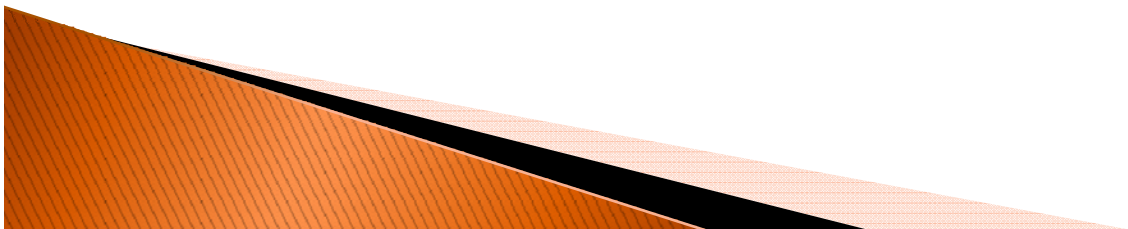
- ▶ Chaired by Surgeon General and Members are Cabinet Heads
- ▶ Required to submit National Strategy report by March 23, 2011.
- ▶ President's Executive Order lists domestic violence screenings
 - Effort to expand to lifetime exposure



Prevention Investment (cont.)

National Prevention, Health Promotion & Public Health Council

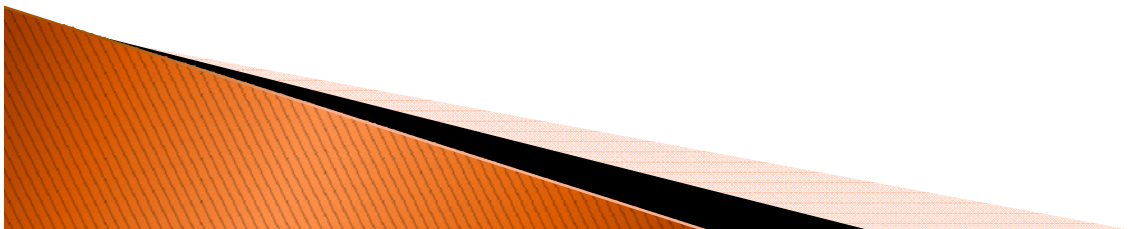
- ▶ 25 Member Advisory Group will be created
- ▶ Include expertise in: (1) worksite health promotion; (2) community services, including community health centers; (3) preventive medicine; (4) health coaching; (5) public health education; (6) geriatrics; and (7) rehabilitation medicine.”



Prevention Investment (cont.)

Center for Patient-Centered Outcomes Research Institute

- ▶ a private, non-profit corporation funded through public and private funds
- ▶ funds additional comparative effectiveness research to help inform clinical practice
- ▶ Previous comparative effective research in stimulus bill did not focus on violence and abuse but we could advocate that some portion of future funds do



In Closing...

- ▶ Many funding and policy change opportunities exist for states, health providers, service providers to address violence and abuse across the lifespan
- ▶ NHCVA can help identify and track these opportunities

For more information:

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202.682.1212

