



**WOMEN'S
FUND** of Omaha

ADOLESCENT HEALTH PROJECT

**ANNUAL
REPORT**
2016

GRANTEE ACKNOWLEDGMENTS AND LIST OF GRANTEES

We would like to acknowledge the staff at the Adolescent Health Project (AHP) grantee organizations whose commitment to this project helps forward actions that bring about the desired changes and outcomes:

- Charles Drew Health Centers, Inc.
- Douglas County Health Department
- Fred LeRoy Health and Wellness Center
- Nebraska AIDS Project

- Nebraska Urban Indian Health Coalition
- North Omaha Area Health Free Clinic
- OneWorld Community Health Centers, Inc.
- Planned Parenthood of the Heartland

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THE CONTEXT

Three key issues underscore the need for the work of the Adolescent Health Project:

SEXUAL LITERACY

- ▶ Research emphasizes the benefits of knowing accurate information about sexual and reproductive health, including gender identity and contraception. An open, non-judgmental dialogue with parents and other trusted adults, as well as comprehensive sex education, is essential for young people to root this knowledge.
- ▶ A recent Nebraska sexual knowledge survey of adults gave adults a D- in sexual literacy, showing many do not have the knowledge to relay key sexual health information to young people. Also, a higher rate of Nebraksa high school students report never having been taught about HIV/AIDS in school compared to students nationwide. Thirty-eight percent of sexually active Nebraska high school students did not use a condom the last time they had sex.

STD RATES

Sexually transmitted disease (STD) rates among young people ages 15 to 24 are notably higher in Douglas County than they are in the state of Nebraska or nationwide.

FIGURE 1 RATES OF CHLAMYDIA, 15 TO 24 YEAR OLDS

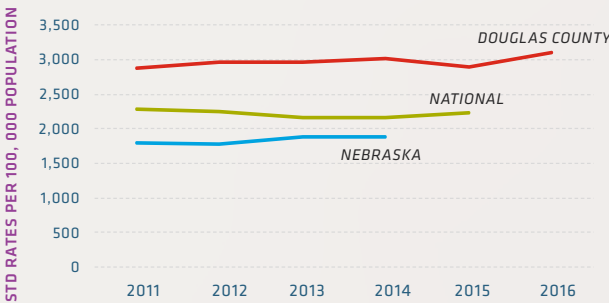
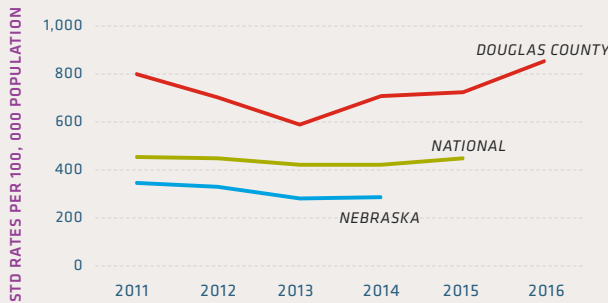


FIGURE 2 RATES OF GONORRHEA, 15 TO 24 YEAR OLDS



TEEN PREGNANCY

From 2005 to 2014, the teen birth rate (15 to 19 year-old females) dropped significantly for the nation, Nebraska, and Douglas County.

FIGURE 3 TEEN BIRTH RATES

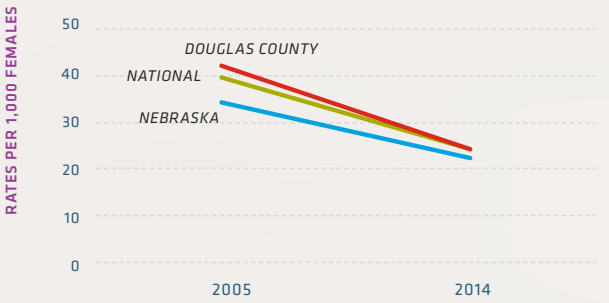
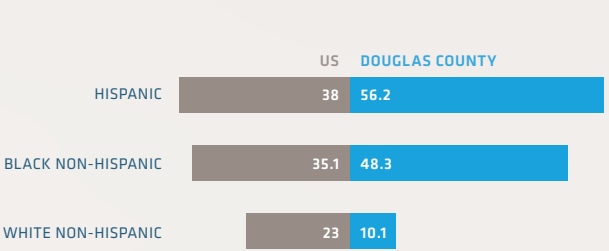


FIGURE 4 TEEN BIRTH RATES PER 1,000 FEMALES, 2014



Although the birth rate for 15 to 19-year-old females is decreasing for teens of all races and for Hispanic teens, racial and ethnic teen birth disparities persist, corresponding to racial and ethnic disparities in poverty.

CONTRIBUTING FACTOR
POVERTY RATES

People who struggle financially face challenges that can increase their risk for STDs and teen pregnancy. People who live in high poverty areas have less access to health care and other services.

Children born to teen parents are themselves at greater risk of poverty. Teen parents are less likely to complete higher education and obtain living wage employment.

Overall, poverty rates are slightly higher in Douglas County (14.7%) than they are statewide (12.9%), but the poverty rate more than doubles for people who are racial minorities or Hispanic. Omaha ranks worst in the nation for African American child poverty, with nearly 60% of African American children living below the poverty line.

The AHP is mindful of socio-economic conditions in Douglas County that are associated with health outcomes.

AHP OVERVIEW

The Adolescent Health Project (AHP) was launched in 2015, following more than a year of careful research and planning by the Women's Fund of Omaha (WFO) and other stakeholders. Private donors have invested more than \$5.8 million toward the AHP's development and implementation. The project goals are:

- ▶ To create sustainable community-wide changes through a research based, results focused, comprehensive approach.
- ▶ To increase the sexual knowledge of youth and, thereby, decrease the number of youth engaging in risky sexual behavior and the rates of STDs and teen pregnancy.

The AHP vision is to provide opportunities for young people to reach their full potential.

The key expected impact is sustainable change to enhance the sexual and reproductive health of 15 to 24-year-olds, including to decrease racial and ethnic disparities in STD and teen pregnancy rates.

The main outcomes of interest are:

- ▶ Decreased rates of STDs among 15 to 24-year-olds
- ▶ Decreased rate of teen pregnancy

These outcomes are supported by:

- ▶ Increased STD testing and treatment
- ▶ Increased distribution of condoms
- ▶ Increased distribution of contraception, including long-acting reversible contraception (LARC)
- ▶ Comprehensive sex education

In 2016, the AHP built on the media and messaging, increased access to services, and outreach and education that began in 2015.

AHP THEORY OF CHANGE

AHP VISION

- ▶ Provide opportunities for young people to reach their full potential

IMPACT

- ▶ Sustainable change to enhance sexual/reproductive health of 15 to 24-year-olds
- ▶ Decreased racial/ethnic disparities in STD and teen pregnancy rates

CONTEXT

- ▶ High rates of STDs, especially 15 to 24-year-olds
- ▶ Disproportionate rates of STDs and teen pregnancy by race and ethnicity

AHP IMPLEMENTS

MEDIA CAMPAIGN

COMPREHENSIVE SEX ED

CAPACITY EXPANSION

ACCESS TO SERVICES

CONDOM DISTRIBUTION

PROVIDER TRAINING

OUTREACH & EDUCATION

CONTRACEPTIVE ACCESS PROJECT

SO
THAT

YOUTH AND YOUNG ADULTS CAN

- ▶ Access and engage with information
- ▶ Build knowledge and skills
- ▶ Dialogue with parents and other trusted adults
- ▶ Regularly access services

TO

Enhance their sexual and reproductive health

OUTCOMES

- ▶ Decreased rate of STDs among 15 to 24-year-olds
- ▶ Decreased rate of teen pregnancy

Increase access. Reduce barriers. Facilitate change.

IMPLEMENTING COMPREHENSIVE SEX EDUCATION IN OMAHA PUBLIC SCHOOLS

ACTION

Omaha Public Schools (OPS) has long recognized the importance of offering a human growth and development (HGD) course to students that includes components that address sexual and reproductive health to improve students' sexual literacy. Nevertheless, until 2016, the OPS HGD curriculum had not been updated in 20 years.

In 2016, with support and guidance from the WFO and other AHP partners, OPS adopted new, current and comprehensive HGD standards and a curriculum based on National Sexual Education Standards. OPS also adopted several policies to facilitate parent and community involvement in the implementation of the HGD curriculum. Specifically, the district developed a communication plan to assist schools and teachers as they interact with parents and community members around the curriculum and a frequently asked questions document for community partners working in OPS buildings.

The HGD standards are grade-specific. Many of the sexual and reproductive health topics directly align to focus areas of the AHP (Table 1). The documents, curriculum pacing guides, and the HGD standards are available on the OPS website.

The updated HGD standards are taught to OPS students in grades 4, 5, 6, 7, 8, and 10. As such, this academic year, nearly 22,000 students could potentially be exposed to the curriculum.

TABLE 1 OPS HGD SEXUAL AND REPRODUCTIVE HEALTH TOPICS TAUGHT IN DIFFERENT GRADES

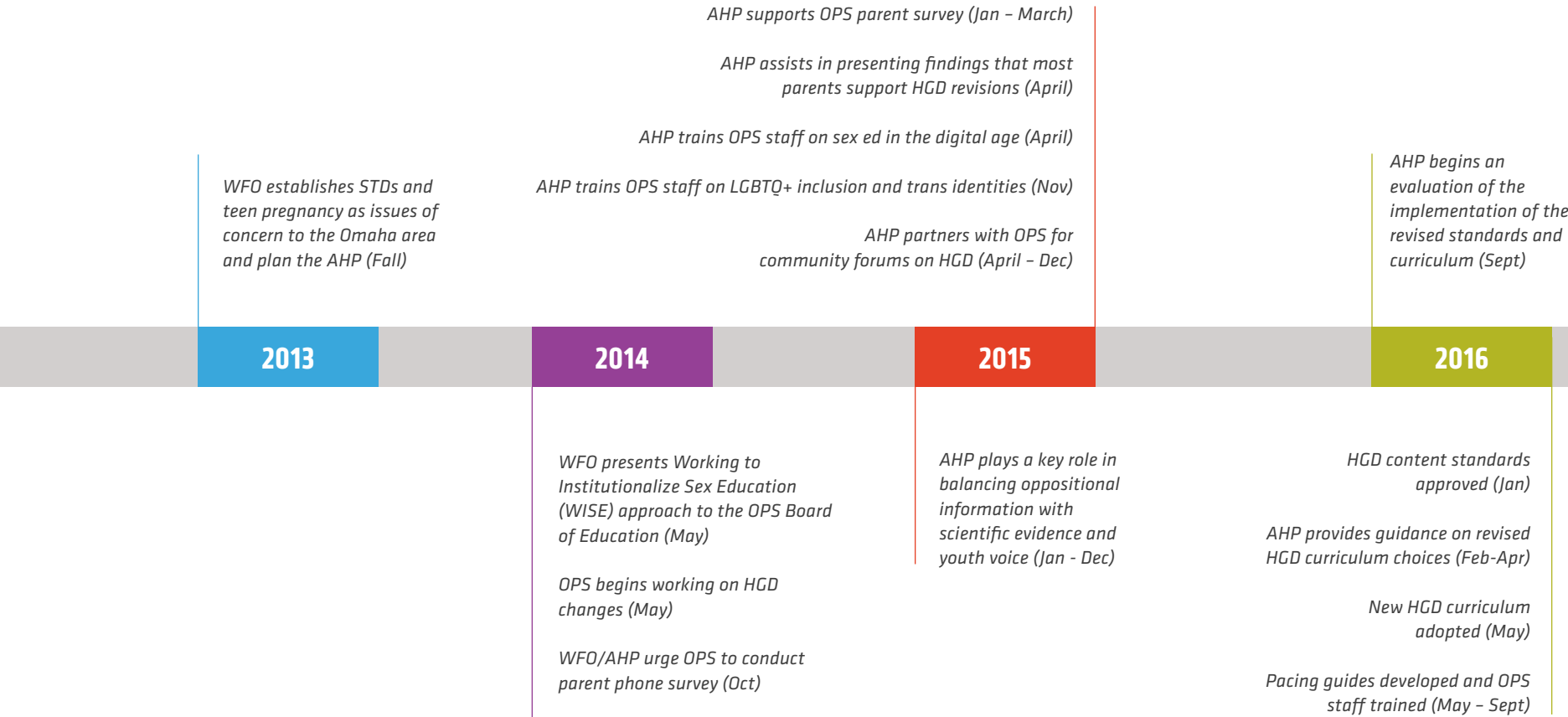
	4	5	6	7	8	10
Infectious disease (including HIV/AIDS)	•	•				
STDs, HIV/AIDS			•	•	•	•
Sexual orientation and gender identity				•	•	
Gender identity, biological sex, and sexual orientation*						•
Sexual harrassment, assault, and abuse	•				•	
Domestic violence and sex trafficking					•	•
Healthy relationships				•	•	•
Male and female reproductive systems and fertilization				•	•	
Reproductive system						•
Prenatal development		•				
Teen pregnancy					•	
Abstinence				•	•	•
Pregnancy prevention/reproductive prevention options*				•	•	•
*Topics with asterisk were added during revision process						

RESULTS

During interviews, community leaders reported that their organizations provide training, education and information services that support the HGD standards.

District and community leaders agree that the OPS standards and AHP activities reinforce one another through common language and resources. Community leaders report that the revised standards give them more freedom to enhance comprehensive services to align with the OPS HGD instruction in classrooms. District leaders emphasize that the standards increase student awareness about community services.

TIMELINE FOR IMPLEMENTATION OF REVISED OPS HGD STANDARDS & CURRICULUM



LAUNCHING A MEDIA CAMPAIGN TO RAISE AWARENESS

ACTION

The AHP media campaigns, launched in January 2015, focus on delivering accurate and appropriate messages about STDs and teen pregnancy to youth, young adults, and the broader community. The content of the media campaigns changes often to raise awareness and facilitate conversations about STDs and teen pregnancy. The media campaigns use traditional mediums such as billboards, print ads, radio and television ads, and websites, as well as social media. To date, 12 campaigns have been implemented. The following highlights the 2016 campaigns.

RESULTS



Condom Art (Feb – Apr): Displayed condom art and provocative phrases to promote condom use and prevention of STDs.

Condom Dress (Mar – Apr): Displayed dresses made of condoms during prom season in stores that primarily sell prom dresses. The dresses had tags with STD prevention messages instead of price tags.



Rubber Rover (Aug): A roving Jeep outfitted with condom images and messages traveled to locations and events throughout Omaha to raise awareness about STD prevention. The Rubber Rover was advertised through social, print, and broadcast media and the GetCheckedOmaha.com website.



Think Your Teen Life Won't Change (June – Aug): Communicated the importance of teen pregnancy prevention through images showing that teen pregnancy can hinder teens from achieving their goals.



The Birds, The Bees and The STDs (launched Oct): Through a variety of tactics, including a rap video and online "sex-tionary", this campaign encourages parents to have conversations with their children about sex, pregnancy prevention and STD prevention earlier and often.

GRANTEE CAPACITY BUILDING

Building the capacity of the AHP grantee organizations included:

- ▶ Enhanced outreach and education.
- ▶ Expanded STD testing and treatment.
- ▶ Expanded condom distribution.
- ▶ Increased collaboration.
- ▶ Trainings for AHP staff and other providers.
- ▶ Provision of no cost contraception.

AHP's capacity building has included expanding staffing and hours to increase access to STD services; staff training on culturally responsive, trauma informed, identity affirming sexual and reproductive health services for young people; participation in a Learning Collaborative of AHP partners to share and diffuse promising practices and to create and adopt operating principles; and incorporation of young people's voice to shape the services they need, including teen advisory groups.

“AHP is true collaborative work...it's genuine, it's not territorial. Before, we all understood the concept but it wasn't happening. There is synergy in the non-competition – we complement one another.”

“...It's just now part of our vocabulary that we're looking at these young adults; they rise to the top of discussion when we're talking about extended hours or services, expanding education. It's really a focus that I don't think we would have the capacity to do before.”

“The training on birth control has been helpful, knowing the options out there, and where we can send clients to access – building these connections is very helpful...”

EXPANDING OUTREACH AND EDUCATION

ACTION

Outreach and education is crucial to diffusing information community-wide about sexual and reproductive health and where services can be accessed. In addition to embedding themselves in many community events, AHP outreach staff are expanding their partnerships with community organizations and have demonstrated that these partnerships are particularly helpful for engaging hard-to-reach populations. Optimally, outreach and education is combined with offering on-the-spot and free access to STD testing and condoms, and warm hand-offs for other needed services.



RESULTS

In 2016, AHP outreach events reached or served 48,205 individuals.¹ The number increased from 7,643 in the 4th quarter 2015 to 14,292 in the 4th quarter 2016 (Figure 5). While the number of outreach events dropped from the 3rd to 4th quarters of 2016, the increase in people reached in the 4th quarter suggests that AHP staff are identifying the most productive events.

¹ This number is a duplicated count, meaning one individual could have attended multiple events during the time period.

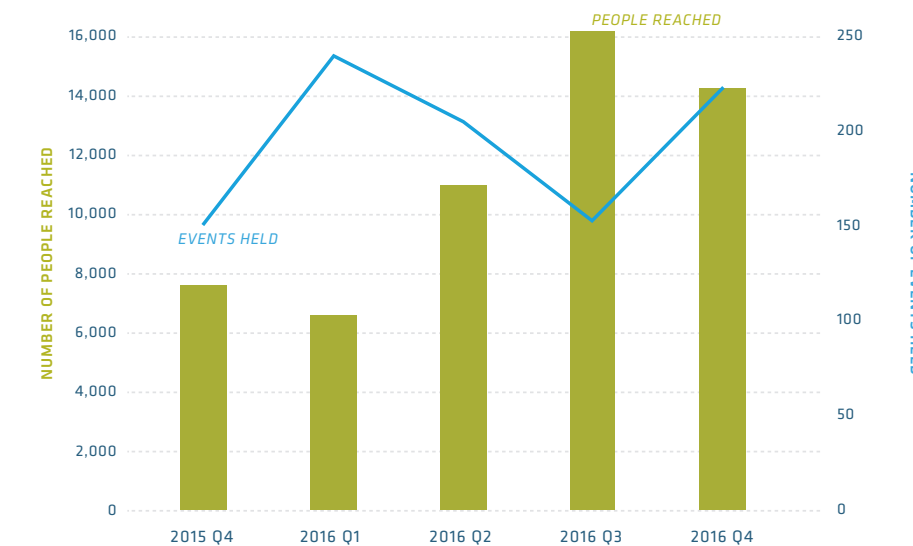
Although there is some continued stigma in the community against talking about sexual and reproductive health, AHP grantees have steadily accelerated their outreach and education, demonstrating AHP guiding principles such as 'no wrong door,' 'flexible and creative,' and 'trauma informed.'

They promote normalizing conversations about STDs, condom use, and contraception through strategies that engage and educate parents/

trusted adults and that discuss effective approaches for adults to dialogue with youth and young adults on these topics.

Their approaches include going deep into the community at youth- and young adult-targeted events including sports programs, summer camps, after school and youth empowerment programs, music events, college/university settings, the LGBTQ Emerging Youth Leaders Conference, and Heartland Pride Youth Night.

FIGURE 5 GRANTEE OUTREACH AND EDUCATION EVENTS



AHP grantees have used strategic outreach to engage with hard-to-reach and diverse populations; for example:

- ▶ Young people from minority racial and ethnic groups through presence at community colleges, a health conference for Native American youth, and targeted social media created by grantee staff.
- ▶ Males through distribution of information and condoms at a pawn shop, barber shops, tattoo/body piercing locations, correctional facilities, and male-focused community organizations.
- ▶ Young people in the LGBTQ+ community through participation in LGBTQ+ events and facilitating LGBTQ+ family and support groups.
- ▶ Homeless young people, through coordinated off-site testing and education at community organizations serving homeless youth.
- ▶ Sex workers, by distributing free condoms to volunteer organizations providing these workers support where they gather.
- ▶ Young people with different abilities and their parents, through education on the normalcy of emotions and sexual behavior.

AHP grantees also:

- ▶ Engage faith community leadership to integrate sexual health conversations into their work in the community.
- ▶ Address upstream prevention by reaching parents and grandparents in venues such as block parties and AARP events.



INCREASING THE PREVALENCE AND INNOVATING THE METHODS OF STD TESTING

ACTION

The STD testing, treatment and prevention component of the AHP addresses the comparatively high rate of STDs in Douglas County, particularly among 15 to 24-year-olds. This component began in January 2015 with the launch of the first segment of an innovative media campaign to raise awareness about STDs and encourage community conversation. In September 2015, AHP funded seven Omaha-based organizations to expand access to free STD services by expanding clinic hours, enhancing off-site testing locations, and increasing outreach and education. In addition, the WFO implemented a schedule of comprehensive trainings.

RESULTS

AHP grantees significantly increased the number of sites offering evening and weekend STD testing (Figure 6). Several organizations doubled or tripled the number of hours they offer testing each week.

Figure 7 shows the steady increase in the number of STD tests completed by grantees since AHP implementation, with that number doubling from 2014 to 2016.

Figure 8 shows relatively little change in the percentage of positive STD tests from year to year, averaging at around 10 percent of all tests.

Figure 9 overlays the number of tests among residents of each Douglas County zip code against the population density for that zip code.

FIGURE 6 STD TESTING HOURS EXPAND BETWEEN 2015 AND 2016

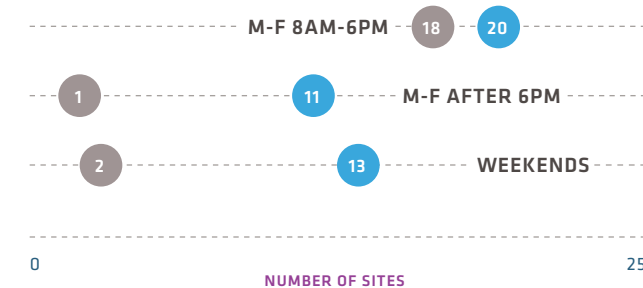


FIGURE 7 STD TESTING MAINTAINS INCREASE AFTER AHP FUNDS EXPANDED SERVICES

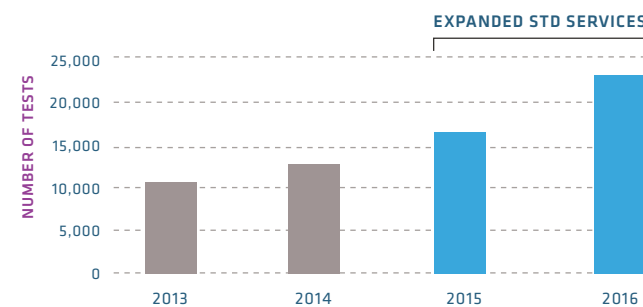


FIGURE 8 CHANGE IN POSITIVE STD TESTS

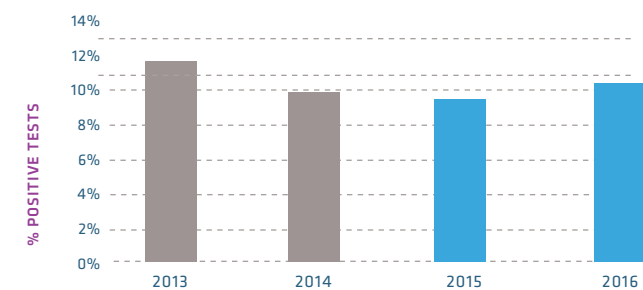
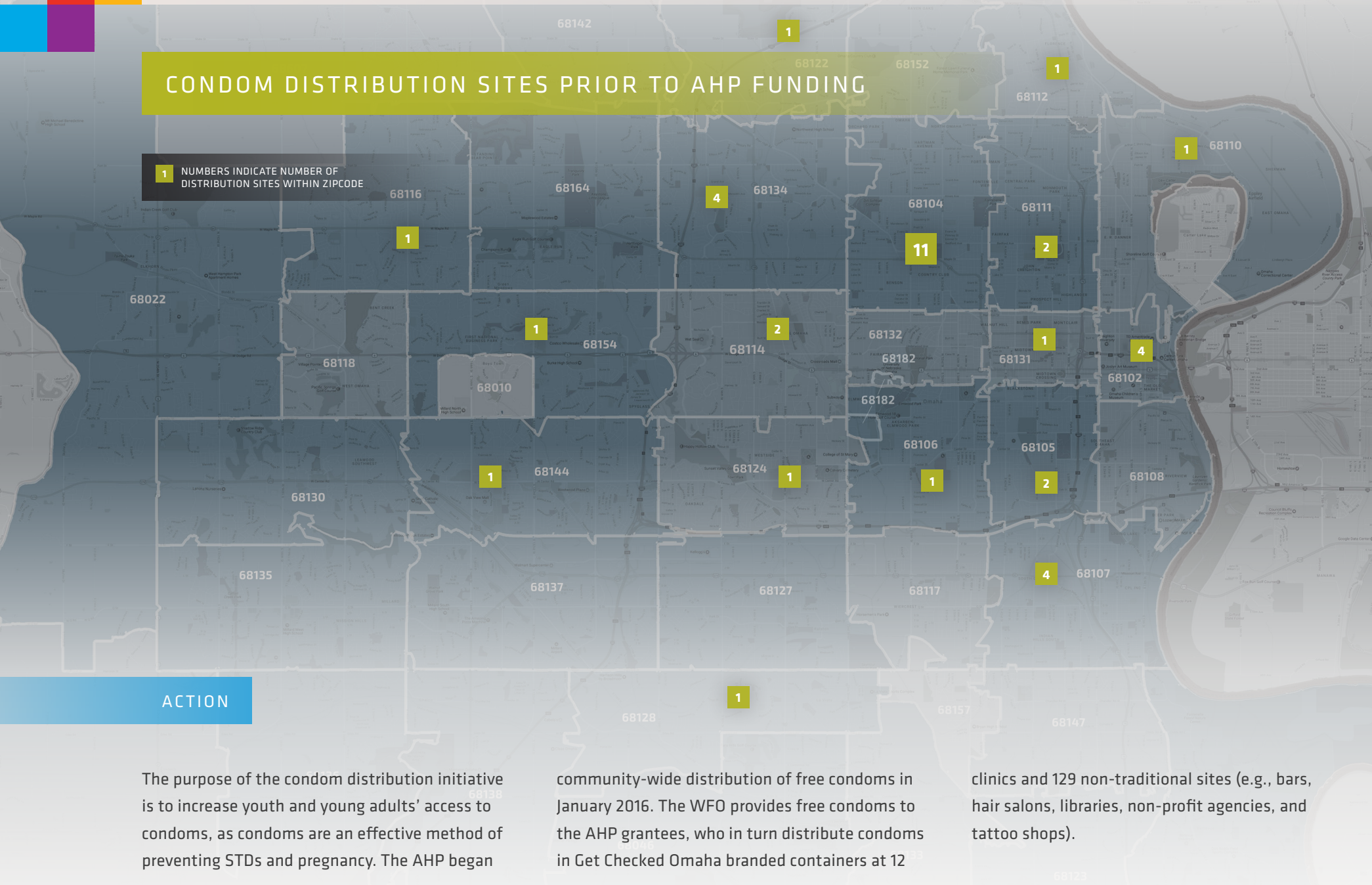


FIGURE 9 NUMBER OF STD TESTS BY ZIP CODE, AHP GRANTEES JUNE-DECEMBER 2016



CONDOM DISTRIBUTION SITES PRIOR TO AHP FUNDING

1 NUMBERS INDICATE NUMBER OF DISTRIBUTION SITES WITHIN ZIPCODE



ACTION

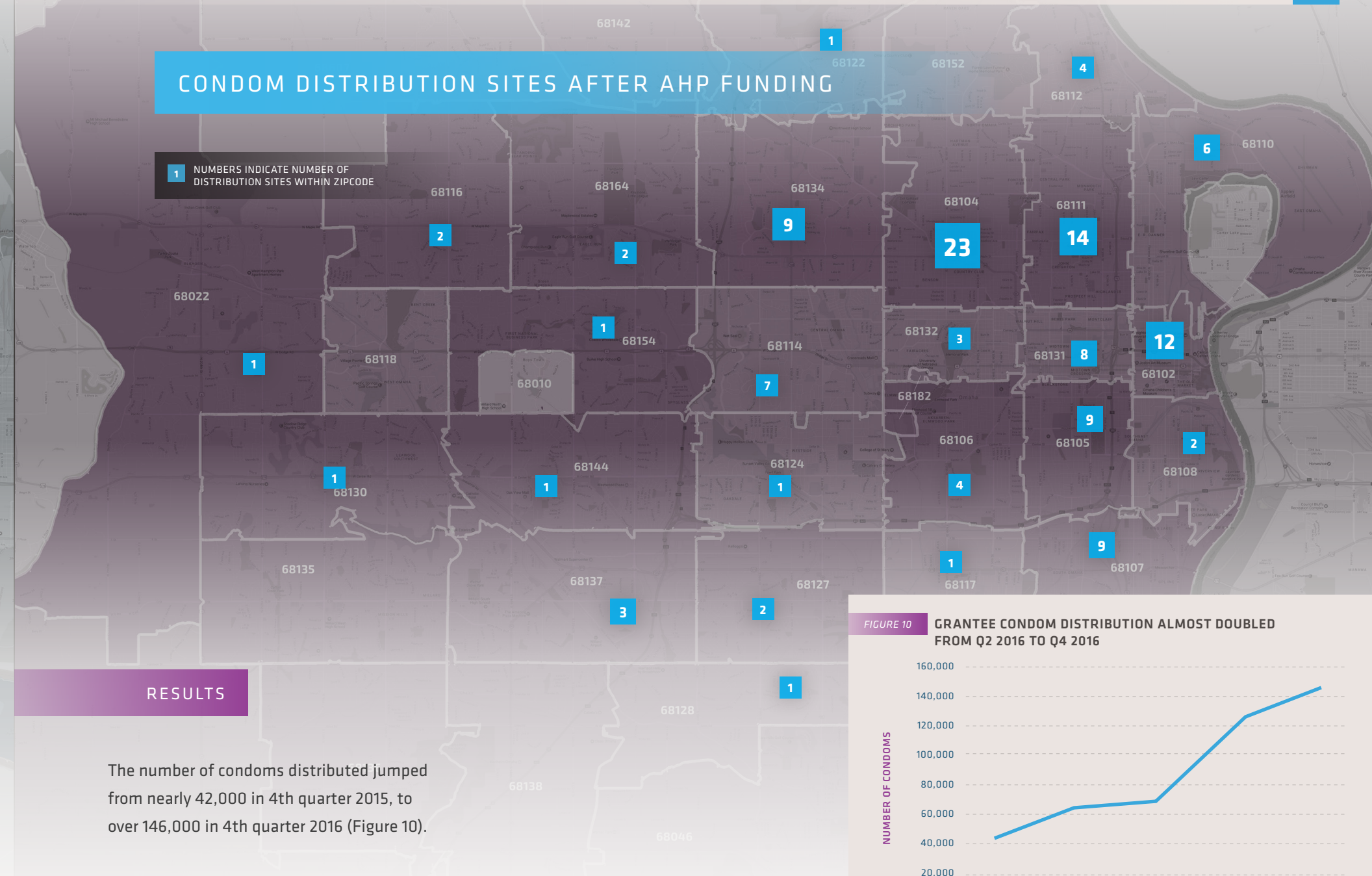
The purpose of the condom distribution initiative is to increase youth and young adults' access to condoms, as condoms are an effective method of preventing STDs and pregnancy. The AHP began

community-wide distribution of free condoms in January 2016. The WFO provides free condoms to the AHP grantees, who in turn distribute condoms in Get Checked Omaha branded containers at 12

clinics and 129 non-traditional sites (e.g., bars, hair salons, libraries, non-profit agencies, and tattoo shops).

CONDOM DISTRIBUTION SITES AFTER AHP FUNDING

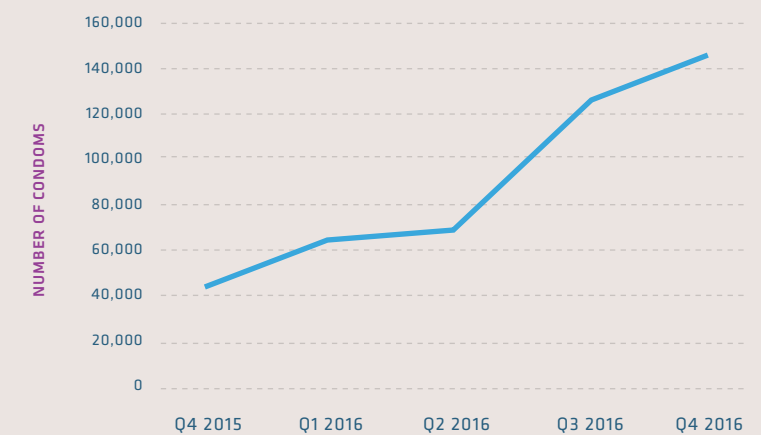
1 NUMBERS INDICATE NUMBER OF DISTRIBUTION SITES WITHIN ZIPCODE



RESULTS

The number of condoms distributed jumped from nearly 42,000 in 4th quarter 2015, to over 146,000 in 4th quarter 2016 (Figure 10).

FIGURE 10 GRANTEE CONDOM DISTRIBUTION ALMOST DOUBLED FROM Q2 2016 TO Q4 2016



ENHANCING COLLABORATION

ACTION

Collaboration among AHP funders and grantees, and with youth and young adults, is crucial to diffusing promising practices, addressing challenges, and ensuring collective impact towards sustainable systems change supporting sexual and reproductive health.

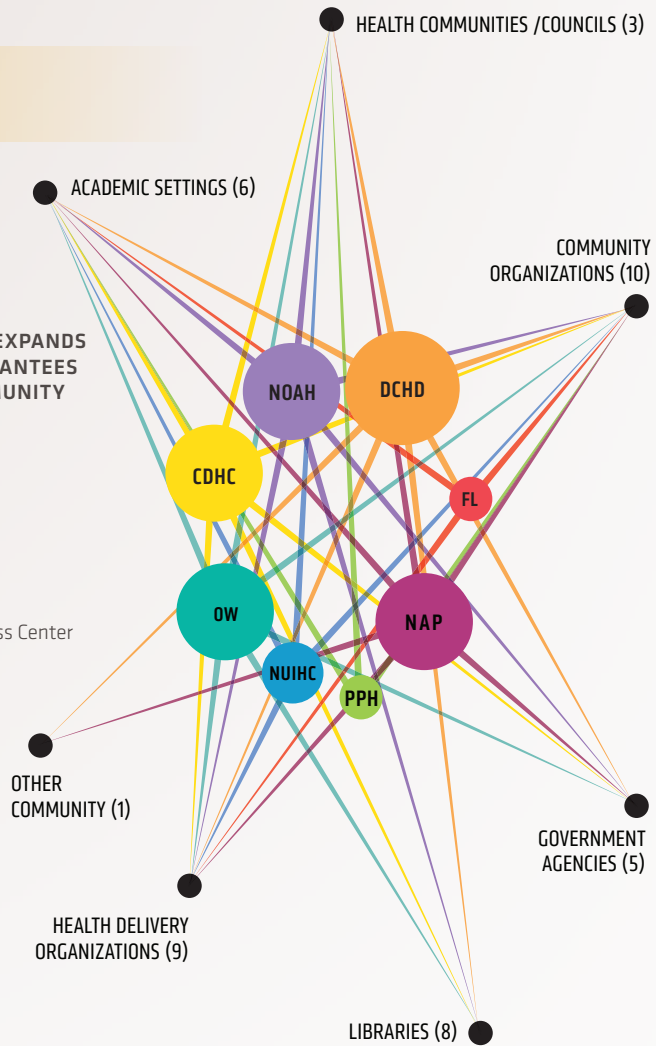
- ▶ The AHP Learning Collaborative is a formal mechanism for building collaboration, and meets monthly to provide grantees and funders strategic opportunities to cultivate organizational relationships, share promising practices, and address implications of emerging outcomes.
- ▶ Informal grantee collaboration is also emerging, most notably among AHP outreach workers who meet regularly in large and small groups to share practices and ideas for collective activities to reach young people. They also cross-refer clients to enhance the range of services a client can access, assisting the client with making the appointment and providing comprehensive information about the referral.
- ▶ Contraceptive Access Project (CAP) clinicians are communicating with one another on contraception questions, which has been facilitated by their participation in AHP trainings.
- ▶ AHP partners collaborate with youth and young adults in several ways: AHP grantee youth advisory councils/ambassador programs, and involving them in the project evaluation process as a source for feedback to the Learning Collaborative and as research interns.

RESULTS

FIGURE 11

COLLABORATION EXPANDS BETWEEN AHP GRANTEES AND OTHER COMMUNITY ORGANIZATIONS

- CDHD**
Charles Drew Health Center
- DCHD**
Douglas County Health Dept.
- FL**
Fred LeRoy Health and Wellness Center
- NAP**
Nebraska AIDS Project
- NOAH**
North Omaha Area Health
- NUIHC**
Nebraska Urban Indian Health Coalition
- OW**
OneWorld Community Health Centers
- PPH**
Planned Parenthood of the Heartland



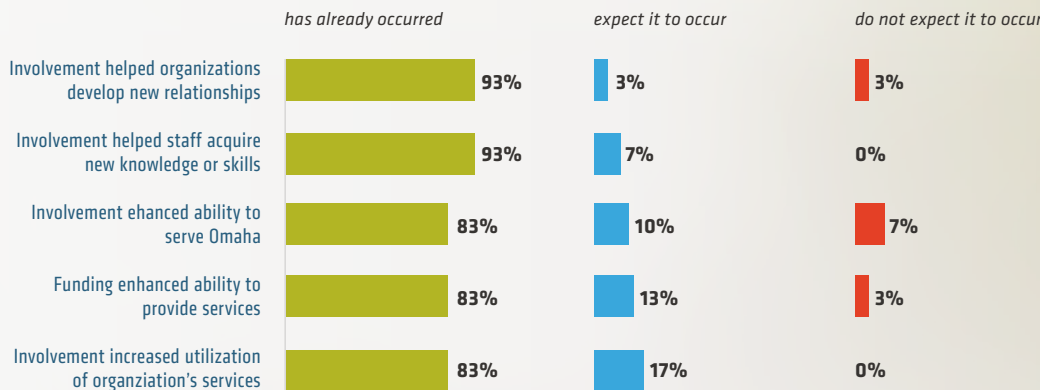
AHP grantees also partner with community organizations outside of the Learning Collaborative. Figure 11 shows the types of organizations with whom grantees have partnered in 2016 on adolescent sexual health.

[Note on Figure 11: The large circles show the AHP grantee organizations, and the small circles show the types and numbers of community organizations which which they have partnered. Larger circles indicate grantee organizations with a greater number of community partners. The colored lines connect each grantee to the types of organizations with whom they have partnered.]

RESULTS

In 2016, the Learning Collaborative finalized guiding principles that reflect values for their work with youth and young adults, and results of a collaboration survey show that initial efforts to increase collaboration among AHP grantees have been very successful. Grantees feel very positively about working with one another and about the support provided to them by AHP management/leadership (Figure 12).

FIGURE 12 GRANTEE OPINIONS ON POSITIVE IMPACTS OF AHP



COLLABORATION IN ACTION

The collaboration among outreach staff will culminate in a joint prom event in Spring 2017 at Charles Drew Health Center where young people can obtain STD tests (which will be incentivized by a free prom ticket) and sexual health information. In addition, vendors will be present so young people can get low cost suits and ties, dresses, and other prom-related support. Volunteers from AHP grantee youth councils will also participate in the event.

It's the first time we're bringing young men and women together [for the prom event]... We heard how stressed these girls were about homecoming and some weren't going to go just because they felt like they'd have to have sex if they went and a lot of young folks are suicidal at that time of year... so it just folded out from there.

AHP staff are also collaborating with other staff at their organizations to exchange information that helps support young clients.

PROVIDING TRAINING TO HEALTH CARE PROVIDERS

ACTION

The WFO organizes mandatory and voluntary trainings to all AHP grantee staff, including clinical, frontline, and executive staff. This ensures staff within grantee organizations have the knowledge and skills needed to meet the sexual and reproductive health needs of youth and young adults and to provide services that are culturally responsive and affirm sexual identity. Some trainings are also open to non-funded AHP partner organizations. Local and national experts offer the trainings covering a range of topics included in Figure 13.

RESULTS

The AHP provided 33 trainings and presentations, of which nine were developed specifically for AHP grantees. Grantees or community partner organizations reached out to the AHP to request 20 trainings and presentations.

The WFO takes into consideration needs expressed by AHP grantees and has enriched grantee staffs’ ability to enhance current practice and build new skills that support the AHP work. Feedback from grantees indicates training on being trauma informed and culturally responsive, and

FIGURE 13

- 33 trainings and presentations were offered in 2016, covering the following topics:
- ▶ *Best practices in adolescent sexual health*
 - ▶ *HGD curriculum-related*
 - ▶ *Practices to support LGBTQ youth*
 - ▶ *Best practices related to long acting reversible contraceptives*
 - ▶ *STD trends and research*
 - ▶ *Youth empowerment*

“Trainings are good...knowing how to handle situations if they arise is really good. Very helpful to have all the different trainings, especially since I’m new to this part of the program (AHP).”

addressing the needs of youth and young adults who are LGBTQ as highly valuable.

Pre- and post- training evaluations also help AHP identify and fill remaining training needs. For example, AHP increased support to long acting reversible contraceptive (LARC) sites through weekly on-site coaching and technical assistance that includes building clinics' proficiency in intrauterine device (IUD) insertion and counseling clients on contraceptive options.

OFFERING NO COST CONTRACEPTION

ACTION

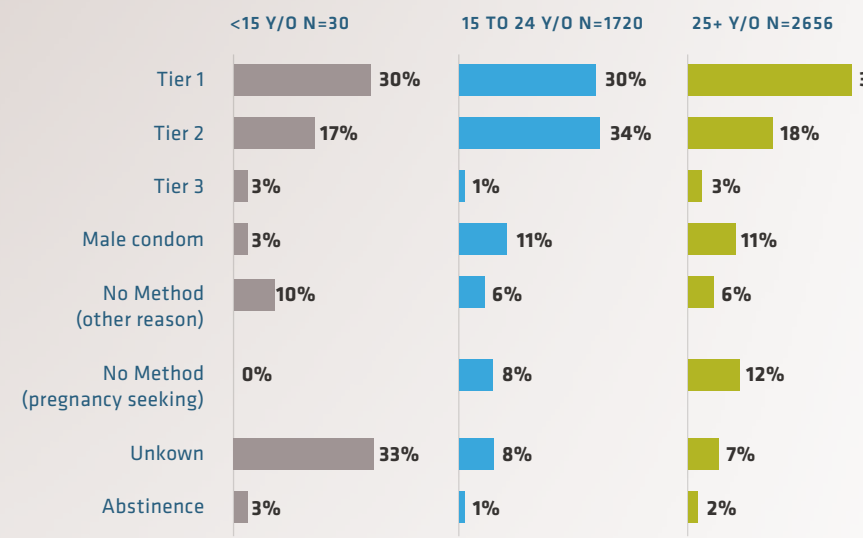
The Contraceptive Access Project (CAP) is the no cost contraceptive component of the AHP, supporting reduction of teen pregnancy in Omaha. This component was launched in July 2016 with grants to four Omaha-based Title X clinics to provide 15 to 24-year-olds with access to affordable and comprehensive reproductive health services, including no cost contraception (hormonal pill, patch, injections, implants, and IUDs). CAP also provides clinical staff at the four clinics with comprehensive training and ongoing support in areas such as LARC and contraceptive counseling.

RESULTS

Results on contraceptive type distributed by CAP clinics July through October 2016 to 15 to 24-year-olds (Figure 14) show about two-thirds of young women electing Tier 1 or Tier 2 birth control methods (see key for types in each tier with Tier 1 being the most effective). So far there is a slight preference in this age group for Tier 2 methods.

A survey to measure satisfaction with CAP services and contraception options has been developed and is in the early stages of use; hence, data are not yet ready to present.

FIGURE 14 FEMALE FAMILY PLANNING BY CONTRACEPTIVE TIER, CAP, JULY - OCT. 2016



Key:
Tier 1 - IUD, Implant, Female Sterilization
Tier 2 - Injection, Pill, Patch, Ring, Diaphragm
Tier 3 - Female Condom, Withdrawal, Sponge, Fertility Awareness-based Methods, Spermicide

SUMMARY

MAJOR ACCOMPLISHMENTS

MAJOR ACCOMPLISHMENTS OF THE AHP GRANTEE AGENCIES THIS YEAR INCLUDE:

- ▶ Providing support to OPS for adoption of revised HGD standards and curriculum.
- ▶ Meeting people where they are by expanding STD testing and education to non-traditional sites, which reach more males.
- ▶ Increasing the number of venues recruited for routine condom distribution: AHP grantee agencies have 129 routine condom distribution sites.
- ▶ Including youth through youth advisory committees and teen councils.
- ▶ Implementating the Contraceptive Access Project.

MAJOR CHALLENGES

MAJOR CHALLENGES EXPERIENCED THIS YEAR INCLUDE:

- ▶ Low male testing numbers in comparison to females: approximately 3 females were tested for every 2 males between January and December 2016.
- ▶ Low male participation in outreach events, in comparison to females.
- ▶ Increasing STD testing and condom distribution sites in West Omaha.
- ▶ Reaching staff capacity for community engagement efforts.
- ▶ Normalizing STD testing and overcoming stigma.



Brenda Council, AHP Manager,
Women's Fund of Omaha



Michelle Zych, Executive Director,
Women's Fund of Omaha

FROM THE LEADERSHIP

REFLECTIONS FROM THE WOMEN'S FUND OF OMAHA

We are immensely proud to have supported the AHP's many accomplishments in 2016. Our key achievement was to ensure that OPS students will have access to a fact-based comprehensive sex education curriculum. Consequently, more Omaha youth will be equipped with the knowledge to make decisions to protect their sexual and reproductive health.

We realize that knowledge is only useful if services are available to support health decisions. This is why we brought together a group of grantees to create the cornerstone of the AHP: a collaborative provider network delivering accessible, comprehensive, high quality and youth-informed services.

The results of this project in the first full year of implementation are striking: the AHP has successfully increased STD testing among 15 to 24-year-olds by 29 percent and has distributed twice the projected number of condoms. AHP grantees are reaching three times as many people. The condom dress media campaign event even drew international attention to the AHP's STD and teen pregnancy prevention efforts. We recognize that none of this would be possible without the generous investment of our funding partners.

As proud as we are of our 2016 accomplishments, we are setting our goals even higher for next year. Now that education and youth-friendly services are in place, we need to concentrate on dramatically expanding our reach so we can reverse Omaha's rising STD trends and eliminate teen pregnancy disparities.

PLANS FOR 2017 INCLUDE:

- ▶ Engaging with private medical providers, particularly west of I-680.
- ▶ Increasing male participation in STD testing.
- ▶ Increasing AHP engagement with the business community, the faith-based community and other community based organizations.
- ▶ Adding more strategic partners to the AHP.
- ▶ Expanding youth engagement opportunities, which will help us engage traditionally hard-to-reach young people.
- ▶ Normalizing condom usage by increasing earned media impressions, online web traffic and social media reach for each campaign.

We recognize that it will take persistence to achieve our ambitious goals of STD and teen pregnancy reduction. We are also confident that we have the right partners and supporters to do it.

-Brenda Council
-Michelle Zych



**WOMEN'S
FUND** of Omaha

PREPARED FOR

WOMEN'S FUND OF OMAHA

BY

**SMITH & LEHMANN CONSULTING, INC
UNIVERSITY OF NEBRASKA MEDICAL CENTER
EDUCATION NORTHWEST**