



Indian Health Service National STD Program

2006 - First Quarter Report



GOAL #1 Raise awareness of STDs as a priority health issue

Objectives

- A. Communicate effectively with CDC, Division of STD Prevention (DSTDP) in Atlanta and IHS, Office of Public Health Support (OPHS) in Rockville.

Strategies:

- Maintain regular contact with CDC, DSTDP and IHS, OPHS through conference calls, site visits, and electronic communications.

Activities:

- Regular e-mails and telephone calls with Lily
- Participation in IHS/OPHS All Hands staff meeting
- Provide quarterly progress reports.

Activities:

- The first quarterly report will be submitted by 1/31/2006
- Submit periodic updates for the CDC, Program Development Support Branch monthly report.

Activities:

- November – formation of School-Based Screening Work Group
- Give annual presentations on activities.

Activities:

- This has not been scheduled yet

- B. Disseminate STD prevention and control information in a timely manner to IHS, tribal, and urban Indian health programs (I/T/U) and other public health partners.

Strategies:

- Develop and publicize the IHS National STD Program website.

Activities:

- Although the STD Program website has been ready to go live since last fall, it has been delayed waiting for the other Division of Epidemiology program's to finalize theirs. It is scheduled to go live by the end of Feb. 2006.
- Present STD prevention and control information at relevant I/T/U and other public health meetings and conferences.

Activities:

- Presented on innovative STD interventions in Indian Country at the Aberdeen Area STD Summit, Bismarck, ND, Nov. 2005.
- Submitted an abstract on innovative STD interventions in Indian Country to the DHHS National Leadership Summit to Eliminate Racial and Ethnic Disparities in Health in Washington DC on January 9-11, 2006. It was accepted as a oral presentation as part of a panel.
- Submitted three abstracts to the National STD Conference in Jacksonville, FL, May 8-11, 2006: 1) innovative STD interventions in Indian Country; 2) Regional AI/AN STD rates; and 3) the Navajo syphilis outbreak investigation. Still waiting on decision.
- Submitted an abstract on innovative STD interventions in Indian Country to the Embracing Our Traditions, Values, and Teachings: Native Peoples of North America HIV/AIDS Conference in Anchorage, Alaska, May 2-6, 2006. It was accepted as a poster presentation.
- Share relevant scientific and research findings with I/T/U through the IHS Primary Care Provider and the IHS ObGyn monthly newsletter.

Activities:

- Submitted STD-related abstracts for inclusion in the IHS ObGyn monthly newsletter in Oct, Nov & Dec (see: <http://www.ihs.gov/MedicalPrograms/MCH/M/OBGYN01.cfm>)
- Develop and publish articles in peer-reviewed journals to highlight STD issues in Indian Country.

Activities:

- The manuscript developed by the STD Research work group last year was submitted to JAMA but not accepted. The main author is preparing to submit it to the STD Journal.

C. Develop and distribute AI/AN-specific STD materials.

Strategies:

- Collaborate with CDC/DSTD and IHS Health Education to develop AI/AN-specific STD educational and communication materials (e.g. fact sheets, brochures, posters).

Activities:

- We have collected some sample materials and have had conversations with several groups that have created materials.
- We will convene a work group in Q2 to address this need and next steps.
- Print and distribute materials.
- Make materials available for download on the IHS National STD Program website.

D. Recognize and share innovative STD interventions in Indian Country.

Strategies:

- Work with the National Coalition of STD Directors (NCSD) to recognize innovative STD interventions in Indian Country.

Activities:

- We have had conversations with NCSD Director about their proposed role in this activity. They are very interested; our program will develop a document describing the initiative for NCSD and will submit it to them for their consideration and input. This is something the soon-to-be-hired NCSD contractor for AI/AN issues may be able to work on.
- Organize and plan a panel presentation of innovative STD interventions at a national conference.
- Develop, print, and disseminate a compendium of STD interventions in Indian Country.

GOAL #2 Support partnerships and collaborations with state STD programs, I/T/U, and other public health agencies.

Objectives

- A. Maintain a partnership with CDC's Infertility Prevention Project (IPP) to ensure AI/AN issues are represented and to identify opportunities for inclusion of AI/AN in IPP efforts.

Strategies:

- Participate as an ad hoc member in IPP Coordinator's meetings and other regional meetings, particularly those in the Department of Health and Human Service (DHHS) Regions VI, VIII, and X.

Activities:

- Staff participated in these IPP meetings: Region X in Seattle (Oct.), Region VIII in Denver (Oct.), Region VI in OKC (Oct.), and the Coordinator's meeting in Atlanta (Nov).

- B. Support a partnership with the National Coalition of STD Directors (NCSD).

Strategies:

- Provide funds to NCSD to hire a consultant to lead the NCSD AI/AN work group and to carry out specific activities identified by the work group.

Activities:

- Several key work group members reviewed applications in Oct. and a call was held in Nov. to share scores and determine next steps. We narrowed down the applicants to two organizations, which will be interviewed the week of Jan 9th, 2006 by a subset of the first group.

- Participate as a member of the NCSD AI/AN work group.

Activities:

- Participated in a work group meeting at the NCSD meeting in Miami to discuss the MOA and process of recruiting and selecting the contractor. Volunteered to review applications and participate in interviews.

C. Develop partnerships with agencies involved in the health care of AI/AN.

Strategies:

- Identify specific projects with potential new partners.

Activities:

- IHS/HQ has elevated the methamphetamine problem to one of the 2006 Director's Initiatives, including making some funds available for this effort (appx. \$100,000). Lori was asked to join a Meth Initiative Work Group formed in Nov. A strategy call is scheduled in Jan.
- Lori participated in the Red Talon Project's STD/HIV strategic planning session in Portland in Oct. and helped to develop their three-year action plan.
- Lori participated on a Northern Plains STD Task Force call to discuss the Guidelines for STD Screening in Tribal Jails and potential needs for technical assistance to implement them in the Aberdeen Area.
- Lori attended several meetings in Alaska in December, including an STD meeting convened by the Alaska Native Tribal Health Consortium. The meeting included participants from the State of Alaska, the local AETC and PTC, the ANTHC, the Alaska Native Medical Center, and CDC/Arctic Investigations. Jim Williams, from ANTHC, spoke with Doug Johnson regarding a possible request for an Epi Aid to address Alaska's persistently high chlamydia rates. At Lily's suggestion, Lori recommended the letter to Doug request the inclusion of the IHS National STD Program in the process. An STD program evaluation, like what we are planning for Ft. Peck and like what was done in OK may be more appropriate.

- David met with staff from the US Census Bureau to collaborate on a project to improve the methodology for how HIS estimates its service population.
- David continued to meet with staff from the HIS Division of Program Statistics to work on the STD Surveillance Report and to discuss data issues regarding Urban Indians and mental health/substance abuse.
- David met with Elizabeth Sullivan, PHN at Zuni, to discuss and plan an STD jail screening project at the tribal correctional facility. The project proposes to screen all detainees for chlamydia, and those who test positive for chlamydia, will receive a full battery of STD tests.
- Develop strategies to implement projects with new partners.
 - Activities:
 - (Described above.)

GOAL #3 Support improvement of I/T/U, state, and local STD programs for AI/AN

Objectives

- A. Develop and implement new STD interventions.

Strategies:

- Lead and facilitate strategy sessions with I/T/U and state STD programs.

Activities:

- Our office participated in strategy sessions (e.g., Red Talon, Alaska), but did not lead or facilitate any during Q1.
- We facilitated conversations between the Billings Area IHS/Behavioral Health and the Northern Plains Tribal Epi Center/STD/HIV Program to discuss and brainstorm regarding the AI/AN wheel of recovery developed by Billings.

- Provide technical assistance and make linkages to other resources, where appropriate.

Activities:

- We continued to provide informal and ongoing TA to the Project Dine Unity.
- Encourage and fund proposals for local STD interventions.

Activities:

- We are currently funding several local STD interventions, including a jail screening pilot at Zuni, a CT/GC project in Alaska, and the Phoenix Area STD Summit.

B. Evaluate existing STD interventions.

Strategies:

- Identify priority STD program areas and projects for evaluation.

Activities:

- Yolanda Savage was brought on our staff as a contractor in Oct. 2005. She will apply her expertise at conducting public health assessments to refine the STD program assessment tool previously piloted in Rosebud, SD. This tool will be piloted in Ft. Peck, MT in Feb-Mar 2006.
 - Provide technical assistance and make linkages to other resources, where appropriate.
- Activities:
- We continued to provide informal and ongoing TA to the Project Dine Unity.
- Lead and conduct evaluations, where appropriate.
- Activities:
- No activities this quarter.

GOAL #4 Increase access to up-to-date STD training for clinicians and public health practitioners

Objectives

- A. Support STD training for I/T/U providers.

Strategies:

- Announce availability of STD training funds.

Activities:

- These training funds were announced in Nov. to IHS, tribal, and urban providers via e-mail lists and will be announced in the IHS Primary Care Provider this month.
- Process applications and announce awards.
Activities:
 - Applications are due Jan 31 (to-date we have received 15). They will be reviewed by our program, Sharon Adler of the CA PTC, and Lily Blasini-Alcivar. The best 10 applications will be funded and announcements will be made no later than Feb 28.
- Make travel and training arrangements.

- B. Collaborate with federally-funded STD, HIV, and reproductive health training centers to increase I/T/U providers' access to relevant training.

Strategies:

- Identify relevant federally-funded training organizations, such as the STD/HIV Prevention Training Centers (PTCs), AIDS Education and Training Centers (AETCs), Regional Training Centers for Family Planning (RTCs), and Addiction Technology Transfer Centers (ATTCs).

Activities:

- *(This is not a good strategy, since we have already identified the federally-funded training centers . . .)*
- Collaborate with the soon-to-be-funded RTC for Indian Country.

Activities:

- This award announcement has been delayed because of DRH budget issues.

- Participate as an ad hoc member on the Federal Training Work Group quarterly calls and assist planning for the upcoming "4TC" meeting.

Activities:

- We are no longer actively participating on this work group. It has been difficult for Lori to stay connected and involved since taking on Laura's duties.
- Link I/T/U providers to federally-funded training centers.

Activities:

- We are supporting the travel of Gail Bolan to speak at the IHS Combined Council meeting in Phoenix in Jan.
- We are supporting the travel of Linda Creegan of the CA PTC to conduct two training sessions at the Phoenix Area STD Summit in Jan.
- Identify opportunities to involve federally-funded training centers in I/T/U meetings and conferences.

Activities:

- The PTCs have tried for several years to get on the agenda at the IHS Combined Council meeting. This year, we facilitated getting them on the agenda and also arranging for a display table.
- We arranged for the PTCs to have a display table at the Phoenix Area STD Summit.

C. Participate on the IHS/PTC work group.

Strategies:

- Facilitate delivery of PTC training at I/T/U meetings and conferences.

Activities:

- (See above.)
- Make arrangements with appropriate PTCs in response I/T/U requests for STD training.

Activities:

- (See above.)
- Collaborate with PTCs to co-author articles on emerging STD issues to be published in the IHS Primary Care Provider.

Activities:

- We did not collaborate to develop and submit articles to the IHS Primary Care Provider in Q1.

GOAL #5 Support and strengthen surveillance systems to monitor STD trends

Objectives

- A. Optimize utilization of STD data sources internal to IHS.

Strategies:

- Assess the ability of the IHS Resource Patient Management System (RPMS) Lab Package to access timely STD and HIV screening and treatment data.

Activities:

- David contacted Cereplex and determined we could not access CT positivity data through that package. He is following up with Mike Gomez.
- We have had cursory discussions with Stan Griffith regarding the National Data Warehouse. The NDW is unlikely to be live until Fall 2006.

- B. Optimize utilization of STD data sources external to IHS.

Strategies:

- Collaborate with statisticians at CDC/DSTD and IHS to publish an AI/AN-specific STD surveillance report based on CDC data and IHS population statistics.

Activities:

- We have completed our analyses for this report and are finalizing tables, graphs, and text. A graphic design contractor has been identified. The report needs to go through CDC and IHS clearance. Tentatively, we plan to have this report published in March or April 2006.

- Collaborate with IPP, state laboratories, and private laboratories to analyze laboratory data from I/T/U facilities.

Activities:

- No activities this quarter.

C. Create new STD surveillance methods and databases.

Strategies:

- Where possible, work with I/T/U facilities to develop and implement surveillance methodologies for STD testing, case management, partner management, and risk behaviors.

Activities:

- No activities this quarter.

D. Improve availability of chlamydia positivity data.

Strategies:

- Provide incentives to I/T/U facilities to submit individual chlamydia positivity data through the Stop Chlamydia Program.

Activities:

- We revamped the Stop Chlamydia program to obtain positivity data from the participating sites. To-date, 21/61 (34%) have signed letters of understanding accepting the new project terms.
- Provide I/T/U facilities participating in Stop Chlamydia with semi-annual chlamydia surveillance reports.

Activities:

- To-date we have received one Q1 data report and working with the other sites to submit their reports. Once reports are received, analysis will be done and final reports will be returned to the participating sites. The first report is scheduled for June 2006.

GOAL #6 Promote STD research and identify effective interventions for reducing STD morbidity

Objectives

- A. Collaborate with the Tribal Epidemiology Centers to conduct research in STD prevention and control.

Strategies:

- Share and disseminate regional STD surveillance data.

Activities:

- We shared drafts of the Indian Health STD Surveillance Report with several Tribal Epi Centers. David plans to discuss the methodology for his report with John Moseley Hayes, the director of the Nashville Epi Center.
- Final STD Surveillance reports will be disseminated to all Tribal Epi Centers when published in March/April.
- Inform Tribal Epidemiology Centers of field activities in their region and invite them to participate.

Activities:

- We invited the Montana-Wyoming Tribal Leaders Epi Center to participate in the STD program assessment occurring at Ft. Peck.
- Present STD data at the annual Tribal Epidemiology Center meeting.

Activities:

- David will present on the STD surveillance report at the annual Tribal Epi Center meeting (Aug. 29-31, 2006 in Nashville, TN).

- B. Serve as a liaison to CDC and other organizations advocating for the need to conduct STD research.

Strategies:

- Lead a workgroup of key STD researchers and tribal/IHS public health personnel to discuss research strategies and projects.

Activities:

- No meetings with the STD Research Group occurred during Q1.
- Publish an article in a peer-reviewed journal outlining gaps in STD research.

Activities:

- The manuscript prepared by the research group was not accepted by JAMA. It has been submitted to the STD Journal.
- Develop and submit for consideration to the American Public Health Association a resolution calling for increased research and resources to address STDs in AI/AN.

Activities:

- David went to the APHA conference in December. The draft resolution received support from the multiple sections, including epidemiology, MCH, and Health education. The AI/AN caucus also expressed support for this resolution.

GOAL #7 Respond to STD outbreaks

Objectives

- A. Coordinate STD outbreak response efforts in Indian Country.

Strategies:

- Assist in reviewing and analyzing surveillance data.
- Share relevant guidance documents (e.g., outbreak response plans) and discuss immediate response needs
- Provide on-site technical assistance.

- Assist in developing written local response plans and recommendations.
- Build local capacity for managing future outbreaks.
- Facilitate inter-agency partnerships and referrals.

Activities:

- No technical assistance for outbreak response was requested in Q1.

GOAL #8 Support integration of STD, HIV/AIDS, and hepatitis prevention and control activities

Objectives

- A. Develop an integration plan for STD, HIV, AIDS, and hepatitis prevention and control activities.

Strategies:

- Participate in IHS Division of Epidemiology discussions and work groups to develop an integration plan for STD, HIV, AIDS, and hepatitis prevention and control activities.

Activities:

- This strategy has not been initiated.

2006 Project Matrix

Q1 Update

PROJECT	CONTACTS	STATUS	STAFF	RESPONSIBILITIES
GOAL 1: Raise awareness of STDs as a high priority health issue in AI/AN populations				
Innovative STD Intervention Award		Submit proposal to NCSD by end of Q2 (NOTE: If NCSD does not want to issues this award, our office will.)	Lori	Develop criteria, application & announcement; Publish announcement, review applications, select winner; Announce awards to applicants and publicize in IHS Provider; Purchase and deliver goods; Present with plaque (where - ?); Submit abstract for a panel presentation to NCSD - ? STD Conf?
Navajo Syphilis Manuscript		The Navajo Nation IRB unanimously approval the request to draft a manuscript describing the Navajo syphilis outbreak. The manuscript should be completed by April 2006.	David	Draft manuscript. Get NN IRB and CDC clearance to submit to a journal. Submit to journal.
OBGYN Newsletter	Neil Murphy ANMC 907-729-3154	Ongoing - by the 4th of every month	Lori	Submit STD-related abstracts and other relevant STD info for the "STD Corner" of the OBGYN newsletter
STD Education Materials for AI/AN		Will convene work group by end of Q2	Lori	Identify participants, send copies of STD fact sheets, facilitate call, work with graphics person to modify, print and distribute
Website	Tanya Nunez 505-248-4438	Website will go live by end of Feb	Cleo	Cleo will post and update items
PROJECT	CONTACTS	STATUS	STAFF	RESPONSIBILITIES
GOAL 2: Expand partnerships and collaborations to improve efforts to prevent and control STDs in AI/AN communities				
Alaska Chlamydia Meeting	Ellen Provost ANMC/Epi Center Beth Schenck Saltonstall ANMC Jim Williams ANMC	This meeting occurred in Dec	Lori	Waiting for TA request from AK to DSTD

PROJECT	CONTACTS	STATUS	STAFF	RESPONSIBILITIES
Infertility Prevention Projects	Steve Shapiro	Ongoing	Lori	Participate in the IPP Coordinator's Meetings, and regional meetings in Regions VI, VIII, and X.
		Steve Shapiro will visit the IHS National STD Program in April 2006 for an overview of our activities and to discuss how we can best collaborate.	Lori	Brief him on AI/AN STD issues and discuss our involvement in IPP
Meth Initiative Work Group	Wilbur Woodis IHS/HQ	Planning Committee active – planning two regional conferences	Lori	Participate as planning committee member
National Coalition of STD Directors	Kelly Mayor & Don Clark NCSD 202-842-4660 Co-Chairs of Work Group: Tim Lane 801-538-6755 & Julia Ashley 612-676-5665	Interviewed contractors in Jan. – selected joint application from JSI Denver/Northern Plains Tribal Epi Center. Contract should begin 2/1/06	Work Group	Participated in interview and selection process
			Lori	Provide oversight of MOA
			Lori	Participate on work group calls and at work group meetings
GOAL 3: Support improvement of I/T/U, state, and local STD programs for AI/AN				
Alaska CT/GC Project	Beth Schenck Saltonstall, MD, Ryan White Title III Intervention Services 907-729-2908	We need copy of signed MOA for our records (funding amt was \$25,000)	David/ Lori	Oversight of MOA.
Belcourt School-Based Screening Project	Sandeep D. Patel, MD MPH Quentin N. Burdick Memorial IHS PO Box 160 Belcourt, ND 58316 Phone: 701-477-6111 (beeper 336) sandeep.patel@mail.ihs.gov	Repeated screening with funds leftover from FY 05. Waiting for copy of final report	Lori	

PROJECT	CONTACTS	STATUS	STAFF	RESPONSIBILITIES
Chlamydia Screening Coverage Project	Dave Morgan, STD Director, SD DOH, 605-733-4797	A protocol was submitted to the Aberdeen Area IRB in December 2005. The IRB did not approve the protocol, citing several conditions regarding minors, privacy issues, and CDC cross clearance. At this time we are deciding whether or not to pursue this project.	David	Determine whether to revise protocol and resubmit to Aberdeen Area IRB.
	Jayne Longbrake, Health Systems Coordinator, Cheyenne River, 605-964-6190			
	Raymond Uses the Knife, Health Committee Chair, Cheyenne River			
	Valerie Parker, Rosebud			
Dine Unity	Nina Tsethlekia, NNDOH	David attended a meeting in Jan. 2006 to discuss the projects strategies, successes, and obstacles.	Lori/ David	Continue to provide technical assistance as requested
Ft. Peck STD/HIV/Hepatitis Assessment	Julie Bemer, SUD & Sue Snitker, PHN, Ft Peck Indian Hospital 406-768-3491 Laurie Kops, Montana STD Program Manager, 406-444-2457	Yolanda reported end of Oct. and made her first visit in Nov. Yolanda and Lori returned in Jan. to present revised tool and to meet with stakeholders. The assessment is tentatively planned for Feb 27-Mar 3.	Yolanda/Lori	Plan assessment, coordinate team, provide oversight, prepare report, present findings.
Healing Lodge Evaluation		Cancelled due to lack of support/interest from Healing Lodge leadership.	David	
Navajo Area Quarterly Syphilis Call	Dr. Iralu, GIMC	Ongoing – every month	David	Participate on calls.

PROJECT	CONTACTS	STATUS	STAFF	RESPONSIBILITIES
Oklahoma Area STD Assessment	Sohail Khan, Cherokee Nation IRB Co-Chair, 918-456-0671 Ext. 2602	Report finalized and disseminated to stakeholders in Sept. 2005. Project completed.	David	
School-Based STD Screening Guidelines		Work group convened, first calls made, initial tasks assigned	Lori	Facilitate process, publication, and dissemination
STD Re-Screening Protocol		STD re-screening project at WW Hastings Hospital is not possible. Another site may be identified.	David	
Tribal Jail Screening	Dr. David Kessler, Zuni IHS, 505-782-7301, dkessler@abq.ihs.gov Elizabeth Sullivan, Zuni IHS	David conducted a site visit in January 2006.	David	Technical assistance, Oversight of MOU for \$15,000
GOAL 4: Increase access to up-to-date STD training for clinicians and public health practitioners caring for AI/AN				
IHS/PTC Work Group	Sharon Adler CA PTC	Participate on regularly scheduled calls, serve as liaison between I/T/U and PTCs	Lori	Participate on IHS/PTC Work Group.
I/T/U Staff Training		Announced funding, applications due 1/31, announcements by 2/28. Sharon Adler, Lily, and Lori will review applications.	Lori	Announce training support availability; Receive applications and make selection; Support training and travel for appx 10 persons
Phoenix Area Meth Conference	De Alva Honahnie, Phx Area IHS 602-364-5169	De Alva deployed to hurricanes, slowed down process. We still hope to be involved and to potentially contribute appx. \$5,000	Lori	Participate in planning process; Transfer funds to Phx Area to help support conference; Help develop STD component
Phoenix Area STD Meeting	Zeenat Mahal & Becky Leach, ITCA Epi Center 602-307-1982	Held in Tempe, AZ, Jan 24-26	Lori/Cleo	Facilitated conference calls and attended monthly planning meetings; Provide oversight of MOA; will attend meeting and provide logistical support; serve as moderator; handle CE process

PROJECT	CONTACTS	STATUS	STAFF	RESPONSIBILITIES
GOAL 5: Support and strengthen surveillance systems to monitor STD trends in AI/AN				
<p>Accessing AI/AN Lab Data</p>	<p>Dr. Rick Steece, APHL, 605-224-9240, DrRSteece@aol.com</p>	<p>ITU facilities process STD specimens in several different ways - some process them in house, some send them to the state lab, and some send them to private labs.</p> <p>Rick Steece, Director of the APHL Assoc., sent an e-mail to all state lab directors asking whether they processed ITU specimens Is it possible to access the data processed at the state labs?</p> <p>For ITUs that send specimens to private labs, is it possible to get a data dump (free or at low cost)? These data would be especially useful for IPP projects</p> <p>David sent e-mail to Rick on 8/22 to follow-up</p> <p>David following up with some of the large national labs</p> <p>CT positivity data not accessible through Cereplex. David will follow-up with Mike Gomez about using the HIS lab package.</p>	<p>David</p>	

PROJECT	CONTACTS	STATUS	STAFF	RESPONSIBILITIES
<p align="center">AI/AN Surveillance Report</p>	<p align="center">Emmett Swint, Statistician, CDC, (retired)</p> <p align="center">Edna Paisano, Statistician, IHS/HQ - Div of Program Statistics, 301-443- 1342</p> <p align="center">Gene Hill President, Computercraft Corp., 703-893- 8308 x127</p>	<p>Analyses completed. Tables, graphs, and text being finalized. A graphic designer contractor has been identified.</p> <p>The estimated cost to publish 4,000 hard copies of the report is \$42,135.</p> <p>Emmett Swint retired in Jan. 2006, but still working some on the project.</p> <p>We plan to publish the report in March/April 2006.</p>	<p align="center">David</p>	<p align="center">Finalize report.</p> <p align="center">Submit for clearance to IHS, IHS Area Offices, and CDC.</p> <p align="center">Distribute hard copies.</p> <p align="center">Develop web report and CD-Roms.</p>
<p align="center">Stop Chlamydia! Project</p>		<p>The program has been revamped. Instead of collecting case and partner data, we are asking sites to send CT positivity data.</p> <p>David wrote a series of memos, a letter of understanding, and worked with HIS IT staff to develop a data download user manual. Cleo and David have been providing TA.</p> <p>To date, 21/61 facilities (34%) have signed letters of understanding to participate, and 4/61 facilities (7%) have dropped out of the project. One site has already submitted data for Q1 2006.</p>	<p align="center">Cleo/David</p>	<p align="center">Collect data, create database, begin analysis.</p> <p align="center">Provide TA on an as-needed basis</p>

		We will continue to troubleshoot and improve this project. If enough sites send data, we will develop semi-annual reports to send back to each participating facility.		
		We will share data we collect at IPP.		
GOAL 6: Promote STD research to identify effective interventions for reducing STD morbidity in AI/AN communities				
STD Research Group	Sarah Patrick, Univ of SD, 605-357-1500	Manuscript - submitted to AJPH, rejected. Carol Kaufman has revised it and will submit to the STD Journal.	David	Keep APHA resolution alive
	Jeanne Marrazzo, CFAR, Harborview Medical Center, 206-731-3679	David attended APHA in Dec. 2005. He and Sarah Patrick solicited feedback and support from the various caucuses. We will formally submit the resolution to APHA in Feb 2006 pending final discussion with STD research group. The resolution will be voted on the APHA General Council in Nov 2006.		Facilitate conference calls.
	Carol Kaufman, Univ of CO, 303-724-1464	Jeanne Marrazzo has an intern coming next summer - wants to identify AI/AN-related project she could work on.		Work with Carol Kaufman to resubmit manuscript to STD Journal
	Brenda Wood Francis, HRSA, 301-443-0415			Identify potential projects for Jeanne's student
	Matt Town & Tinka Duran, Northern Plains Tribal Epi Center, 605-721-1922			
	Linda Dicker - CDC			
	Lily Blasini-Alcivar - CDC			
	Leslie Randall, Northwest Portland Area Indian Health Board, 503-228-4185			

GOAL 7: Support STD outbreak response efforts by I/T/U, state, and local organizations

GOAL 8: Support integration of STD, HIV, and hepatitis prevention and control activities

Integration Plan		Has not started	Team	STD team will work with Div. of Epi staff to develop an integration plan for STD, HIV, and hepatitis prevention and control activities.
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