INSTITUTE OF WOMEN & ETHNIC STUDIES

Healing is the Revolution







Contents

- 4 Letter from the Founder
- 6 2018 IWES Board
- 8 Mission, Vision, Divisions, Strategies
- 9 Social & Community Reach
- **10** SEM Introduction
- **12** Programs
- 14 SEM Levels & Program Highlights
- 24 Staff list
- **25** Financials & Funding Sources

Letter From the Founder

2018 was a momentous year for IWES as we celebrated our 25 years of existence. Over the past quarter century we have used the Social Ecological Model as the underlying philosophy and conceptual frame for our work, for we truly believe that a person's behavior is shaped not only by their temperament and interpersonal and familial experiences, but also by the neighborhoods they grow up in, the communities to which they belong, the institutions they interact with and the societal laws, policies and media that influence their environments. And hence the programmatic activities that we report on for 2018 continue to reflect this philosophy - from our individual and group level work with women struggling with substance use disorders; to our attachment-based research with Foundation Prep aimed at helping the school leaders create a trauma-informed. playful and compassionate school environment; to the continuation of our In that Number public will campaign (#sadnotbad).

To represent our highlights from 2019, I'd like to take a moment to speak about the new developments in our *In That Number* campaign, especially as it is getting ready to transition to a social marketing campaign in 2019. I am very proud of the impact *In That Number* has had, specifically how it has brought to the attention of both the public at large and our politicians the need for trauma-informed approaches in our educational institutions. In July, the "*The Children of Central*"

City" multi-media series ran in the major local newspaper at the time, Nola.com – The Times Picayune. IWES worked with the reporters over a 4-month period to help them frame the issue of trauma and understand its biology, as well as to share IWES' data on rates of traumatic disorders in youth. The screening of a documentary associated with the news series was attended by the Governor's wife and three city council members, and was followed by the adoption of two trauma-informed resolutions by City Council members, the first being passed within two weeks of the screening. On both occasions, I gave testimony that included IWES' trauma data along with recommendations for prevention, treatment and resources. Resolution R-18-310 called for the building and implementation of trauma-informed systems within the Orleans Parish School Board (OPSB) and all other school systems. A month later, the City Council adopted Resolution R-18-344 to request that the Children and Youth Planning Board (CYPB) create a task force to present recommendations in July 2019 for a comprehensive approach to prevent childhood trauma, and find ways in which existing systems like OPSB and the Metropolitan Human Services District can collaborate to build crosssector partnerships and programming to address childhood trauma. I am proud to share that I was chosen to serve as co-chair for the task force and that IWES' trauma data and language about the need for compassion were incorporated into the CYPB resolution. We're excited to continue to push



for sustainable, policy-based changes that will benefit youth in New Orleans, and we look forward to the campaign's Call-To-Action in 2020 to make these changes possible.

IWES ended 2018 with a blast. Adjectives abound as I try to capture the essence of our culminating event, 'the gala,' so I'll share a few here: exhilarating, mystical, and above all, fun. Perhaps, however, what stands out and is most humbling for me was the amazing turn out from our friends, colleagues and partners in the New Orleans community. People came from every domain that IWES touches – community members who receive our services, funders, collaborative partners, colleagues, thought and academic partners, and of course, our amazing Board of Directors and our staff. We were happy to honor those both living and dead who over time have done the work with us of healing our community - Carol Bebelle, Gina Brown, August Collins, Avis Gray, Deanne Feaster and Linda Usdin.

Lastly, 2018 was also momentous for me personally, as I was able to publish a body of work that I have been contemplating for several decades as a psychiatrist; *how do we, the people of the African diaspora, heal ourselves?* My pondering culminated in the book *Healing Is the Revolution - IWES'* tagline - which brings us back to how I began this letter, with the Social Ecological Model. The book uses the model as the underlying theory of change for healing and growth, and I invite you to explore this Annual Report through the eyes of the Social Ecological Model, as well, to witness our most recent growth along our journey of healing.

I invite you to join in the healing!

Sincerely,

Denese O Shervington

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2018 Board



Denese Shervington, MD, MPH President & CEO

Dr. Shervington has an intersectional career in public health and academic psychiatry. At IWES, she directs a communitybased post-disaster mental health and emotional resiliency recovery program, and a federally funded trauma-informed Teenage Pregnancy Prevention Program. Dr. Shervington is also a Clinical Professor of Psychiatry at Tulane University. Her focus at Tulane is residency education and training. Dr. Shervington is a graduate of New York University School of Medicine. She completed her residency in Psychiatry at the University of California San Francisco and is certified by the American Board of Psychiatry and Neurology. Dr. Shervington received a Masters of Public Health in Population Studies and Family Planning from Tulane University School of Public Health. In 2018, she received the Award for Excellence in Service and Advocacy from the American Psychiatric Association. In 2012, she received the Jeanne Spurlock Minority award from the American Psychiatric Association. Dr. Shervington is a member of the American College of Psychiatrists. She has authored several papers in peer-reviewed journals addressing health disparities, the social determinants of health and resilience in underserved communities.

Michele M. Moore, JD Board Chair



Michele Moore is a corporate and brand communications professional with 25 years managing communications and marketing operations for Fortune 500 corporations, media, government, and nonprofit entities. Her experience across multiple industries

in strategic and crisis communications, media relations, brand marketing, public affairs and corporate philanthropy stem from her senior roles spearheading communications and marketing departments at Nickelodeon, BET, the National Urban League, Temple University, and Lifetime Networks. She is currently the Chief Communications Officer for the National Office of the American Civil Liberties Union. Moore earned her law degree at Howard University and B.A. in Communications at UCLA.



Kandice Doley, JD
Board Treasurer

Kandice earned her undergraduate degree in Marketing at the University of Miami. She joined IWES in 2008 as an Administrative/Program Assistant of the Sexual and Reproductive Health Advocacy Project until enrolling at Loyola University New Orleans' College of Law. She worked as a research assistant for the Henry F. Bonura, Jr. Distinguished Professor of Law, Ms. Jeanne M. Woods, on human rights and international law publications. Upon graduating from Loyola Law in 2012 with a Certificate in International Law, Kandice joined a private practice law firm and now works as a research attorney at the Louisiana Supreme Court.



Ava Rogers, MPA
Board Secretary

Ava has worked in international affairs, specializing in conflict and emergency settings for 20 years. Her previous assignments with the U.S. State Department and the United Nations include the Republic of the Congo, Israel and the Palestinian territories, Nigeria, and Sudan. She has an undergraduate degree in International Relations from Georgetown University and a Masters in Public Administration from Harvard's Kennedy School of Government.



Stephani Hatch, PhD

Dr. Hatch is a social epidemiologist in the Department of Psychological Medicine at the Institute of Psychiatry, King's College London. She earned her PhD at the University of Maryland, College Park and was a former faculty member in the Department of Epidemiology at Columbia University. She is a principal and coinvestigator on several community research projects, including the social inequalities strand of the UK National Institute for Health Research funded by the Mental Health Biomedical Research Centre, South East London Community Health Study. Dr. Hatch is also the co-founder of the Health Inequalities Research Network, a partner with IWES on US-UK comparative studies.



Erica Gollub, DRPH, MPH

Dr. Gollub is an internationally recognized researcher and expert in the area of womeninitiated HIV/STI prevention and advocacy aimed at expanding health education for women and girls. Dr. Gollub has served on both national and international health and regulatory advisory boards and has published and presented widely on her work. She has served in multiple advisory capacities globally, including: Expert Group on Prevention of HIV in Women at the French Health Ministry, National Institutes of Health (NIH) Advisory Meeting on Improving Acceptability Research, and the World AIDS Congress in Durban, South Africa.



Dorothy Peprah, MPH, MPHIL, PhD

Dr. Peprah is widely regarded as an expert in global health, infectious disease, community participatory action research and qualitative methodology. She completed her MPhil and PhD in Epidemiology and Population Health at the London School of Hygiene and Tropical Medicine, and her MPH in International Health at the Boston University School of Public Health. She is currently a Global Health Security Advisor with USAID, responsible for ensuring well-coordinated

and effective delivery of technical and program support across the Agency's Global Health Security Agenda portfolio. The portfolio includes programming to prevent, detect and respond to infectious disease outbreaks, and pre-empt or combat newly emerging diseases of animal origin that could threaten human health. Dr. Peprah has also worked as a global consultant on various projects, including sanitation and hygiene programs in refugee camps, and providing technical support to research teams in Ethiopia, Sierra Leone and South Sudan.



Jacqueline Coleman

Jacqueline Coleman begins her 13th season with the Washington Nationals, as Senior Vice President of Broadcasting, Promotions & Events, Marketing and Game Presentation.

Prior to joining the Nationals, Coleman served as Vice President of Arena Operations, Broadcasting & Radio for the Washington Mystics. With the Mystics, Coleman's team was responsible for in-arena videoboard, TV partner content and technical set-up, as well as serving as the liaison between various departments within Monumental Sports. Coleman also served as the Vice President of Programming and Production for the Charlotte Bobcats' (NBA) Regional Sports Network, CSET from 2004-06. There, she helped lead the production operations formation, content, and launch of the first 24-hour Regional Sports and Entertainment Network programmed exclusively for North Carolina and South Carolina.

Prior to moving into sports full-time, Coleman was Vice President of Sports, Specials and Primetime at Black Entertainment Television where she managed staff in Los Angeles, New York and Washington, D.C.

Coleman earned two NAACP Image Awards during her time at BET, and received various awards and accolades for original programming in sports specials, boxing, comedy, and entertainment.

Coleman grew up in Denver, Co. and currently resides in Washington, D.C.

Mission

IWES is dedicated to improving the mental, physical and spiritual health and quality of life for women, their families and communities of color, particularly among marginalized populations using community-engaged research, programs, training, and advocacy.

Vision

IWES envisions a world wherein all people can live and create environments and communities where health and wellness are valued and promoted so as to enhance the quality of life.

Divisions

Positive Youth Development Community Resilience, Well-being & Mental Health STI/HIV Prevention & Care Research & Evaluation Media & Communications

Organizational Strategies

Education & Interventions
Training & Capacity Building
Community-engaged Research & Evaluation
Reproductive Rights & Sexual Health Policy Advocacy
Communications

Social Reach



TWITTER IMPRESSIONS

254,188



NEW VIDEO VIEWS

2,000



TWITTER RETWEETS/ FAVORITES

1,019



FACEBOOK/
INSTAGRAM REACH

217,849



FACEBOOK LIKES, COMMENTS & SHARES

10,801



NEW FOLLOWERS

999



INSTAGRAM IMPRESSIONS

123,878

Community Reach



YOUTH SERVED - APPROXIMATELY

2,907+



EVENTS/
PRESENTATIONS

59+



PARTNERSHIPS FORMED

91



RESOURCES DISSEMINATED

7110+



COMMUNITY
MEMBERS ENGAGED

1373+



EARNED MEDIA PIECES

23

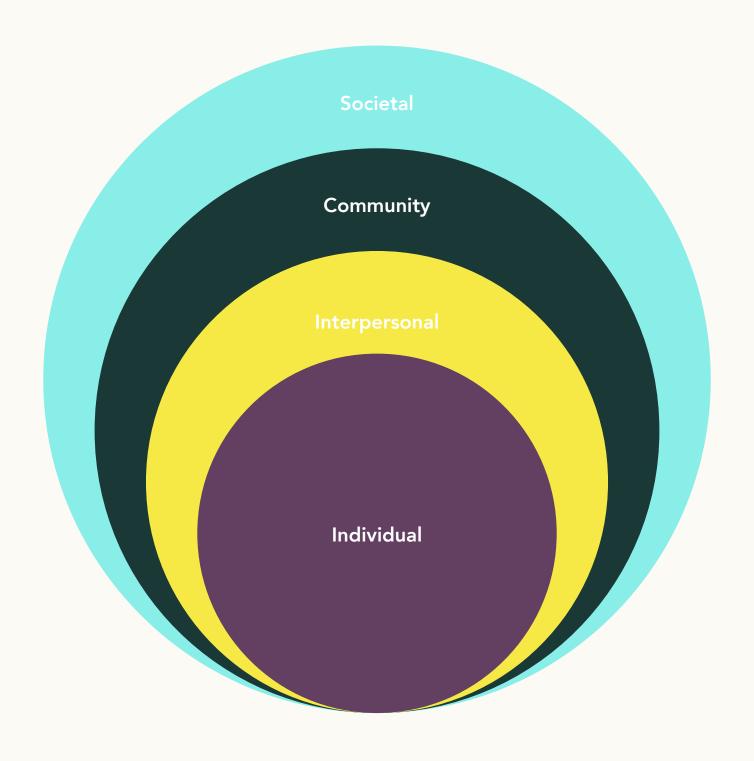
Intro to SEM/AR Layout

For years IWES has utilized the Social Ecological Model (SEM) as a grounding framework through which we approach our work, design our programming and strategize for sustainable impact.

We value this framework because it recognizes the intersectional nature of most issues, taking into account the interconnected nature of multiple factors. SEM provides a lens that not only looks at individual experiences, but also family history, community and organizational factors, as well as societal-level and systemic issues. At times we may choose to focus on one specific level and shape an intervention around it, or we may aim to impact multiple levels at once, utilizing a multipronged approach. That is the beauty of the model. By understanding an issue along different levels, we can choose where to efficiently focus efforts depending on resources, time and desired impact. One can find many versions of this model, often ranging from 4 to 5 levels, yet for the sake of this report we will focus on the individual (personal history, beliefs, attitudes and experiences), interpersonal (family, peers), community (organizations, schools, workplaces, neighborhoods, businesses) and societal (systems-level, societal and cultural norms, policies, infrastructures) levels.

We chose to focus on the Social Ecological Model this year to pair with our theme of "Healing is the Revolution" because we truly believe that for true healing to occur, it has to take place on all of these levels, simultaneously.

We must: heal from our personal traumas and define our individual experiences; work through (positive and negative) familial patterns, understand our family roots and lay seeds for our lineage's continued growth; connect in community and strengthen our bonds through shared love, compassion and understanding; and recognize and work to undo systemic oppression and harmful societal norms, policies and practices, otherwise known as 'healing justice.' Therefore, this year we have broken up our program section into the four levels of the SEM. We will begin by introducing each of our programs and initiatives, then share highlights from each of them according to the level of the model they correspond to. Some of the work spans multiple levels, while others drill down on specific ones, and by organizing this section this way you can see how all of the work at different levels and with different audiences comes together to form The IWES Way to promote healing in New Orleans and beyond.





Programs

Believe In Youth - Louisiana (BY-LA)

BY-LA is designed to reach at least 16,000 African American and Latino youth ages 11-19 in Southeast Louisiana over the course of the five-year program, which is funded by the Office of Population Affairs. BY-LA implements the Making Proud Choices! (MPC!) curriculum with four additional emotional wellness modules focusing on emotional wellness, stress and coping skills that were developed and incorporated by IWES. The program prioritizes quality program delivery, providing safe spaces for participants who identify as LGBTQ, incorporating positive youth development practices, and institutionalizing a trauma-informed approach. The program aims to reach youth with multiple interventions over the course of their adolescence.

Collective for Healthy Communities (CHC)

The Collective for Healthy Communities (CHC) is an initiative that provides community-level interventions that promote well-being and resilience using a social-ecological approach (focusing on the individual, interpersonal,

community and societal levels). In addition, CHC advocates for policy changes that reduce the impact of traumatic exposures in children-at school, in the community, and in the home. CHC is funded by the W. K. Kellogg Foundation.

Creating A Future Together (CrAFT)/ Working to Institutionalize Sex Education (WISE)

Creating a Future Together is an initiative that addresses gaps and shifting policy in sexual and reproductive health in New Orleans. CrAFT works to create an educational and policy environment supportive of youth health and development through teacher training, research, implementation of a gender-transformative sexual health curriculum, and statewide advocacy in coalition with other youth-serving entities. CrAFT's goal is to improve access to, and delivery of, high-quality, comprehensive sexual health education in New Orleans.

The WISE Initiative was created to prepare our nation's youth for life-long health and well-being. WISE is a national initiative implemented across 13 states working to develop sex education

programming that is high quality and sustainable, thus integrated into the curricula and the character of school districts. IWES' WISE work includes supporting district- and charter-level policy development, providing high-quality teacher training on sex education skills and curricula, and providing technical assistance/professional development to schools seeking to institutionalize sex education as part of their overall curriculum. CrAFT and WISE are funded by the David and Lucile Packard Foundation and the Grove Foundation

HIV Testing and Prevention (HTP)

The HIV Testing and Prevention Program (HTP) is a multi-faceted high impact prevention program. This program consists of five key components: targeted HIV testing, Anti-Retroviral Treatment and Access to Services (ARTAS), PROMISE, Peer Advocates Undoing Stigma through Education (PAUSE), and condom distribution. HTP is funded by the Centers for Disease Control and Prevention (CDC) to encourage African American and Latinx individuals, ages 13-60 in the Greater New Orleans area and beyond to access HIV testing services and care. HTP's overall goals are to reduce HIVrelated stigma, provide access to HIV Testing and provide linkage-to-care for individuals who are HIV positive through ARTAS. HTP aligns with the CDC's CHIP model, which aims to identify newly and previously diagnosed HIV positive individuals and assist them in accessing medical care and support services, ultimately reducing the rate of

transmission by lowering the community viral load. HTP has a strong social media and community presence through PROMISE, a community-level intervention focused on Peer Advocacy and role model stories, which encompasses Peer Advocates Undoing Stigma through Education (PAUSE), HTP's multi-pronged social media engagement initiative. Currently, IWES offers both community and venue-based HIV testing.

Research & Evaluation (R&E)

The Research & Evaluation division is a significant contributor to the organization's capacity for program evaluation and continuous quality improvement. IWES houses multiple programs of its own and collaborates with partners and stakeholders on a variety of external initiatives, each with unique needs with regards to data management, data collection, and presentation of outcomes. Beyond accommodating various funder requirements, the Research & Evaluation division works closely with internal program staff and external partners to document and collect additional measures with utility for research, publication, and program/initiative refinement. The IWES Research & Evaluation team specializes in designing and conducting mixed methods research and evaluation activities and has a growing collection of scholarly publications and presentations at national and international conferences.



Individual

(personal history, beliefs, experiences)

1 HIV Testing and Prevention (HTP)

Knowing Your Status; HTP's Testing Efforts Reach over 750 Individuals

The HTP team had a few noteworthy testing accomplishments during 2018. In recognition of National HIV Testing Day (which resulted in participation in an HIV Testing Week), IWES tested 60 people. These 60 individuals contributed to the annual total of people tested, which was 786. That puts the total number of tests provided over the goal of 1500 people to be tested since the program started in the summer of 2015 - and this wasn't even the final year of the program!

HTP staff, Peer Advocates and volunteers also distributed more than 7,000 condoms (plus 110 dental dams) which also exceeded the proposed amount of condoms to be distributed, which was 6,000. On top of that, of those condoms, more than 1,000 were distributed to People

Living With HIV (PLWH), which is a part of many strategies focusing on preventing the spread of HIV by working with people living with HIV (to get linked to care, stay in care, adhere to medicine guidelines, etc.). This year HTP also expanded its condom distribution sites to include, barber shops, tattoo shops, Urgent Care clinics, HIV specialty clinics, and systems-involved youth serving organizations, which are predominantly African American and Latinx focused.

2 Collective for Healthy Communities

(CHC) Discovery through Reflection: Wrapping up Three Years of Introspection during the CARE Retreat

The Compassionate and Restorative Engagement (CARE) Project is a program of CHC that promoted self-care and well-being among leaders and healers whose work impacts vulnerable youth in New Orleans. CARE focused on three main areas: 1) physical health and fitness, 2) emotional well-being and mindfulness, and 3) compassion satisfaction and action. The overall goal of CARE was to support leaders and healers on their self-care journey so that they may sustain their work in the community, and promote wellness and compassion within their organizations and among the populations they serve.

In January the thirteen members of the CARE group met for the second retreat of this two year project to deepen their journeys of searching inwards. Activities included: 1) group exploration of existential givens – the meaning of life, death, isolation and freedom; 2) individual journaling on conflictual personal issues and group share for those willing to challenge issues of vulnerability and previously held fears of feeling ashamed; 3) and practicing mental well-being and resilience building activities such as creative expressions - movement, music and poetry - and centuring in nature. One of the major themes that arose was the desire for immortality, hence, not living in every moment. Through this process IWES has been able to discover a new, deeper understanding of what selfcare truly looks like, aside from the manicures and massages and daily smoothies. The lessons learned from this group are being used to think through how IWES cares for itself and its staff as well as how to promote care and healing with individuals in IWES programming.

3 Research & Evaluation (R&E)

A Pathway to Justice, Healing, and Hope: Addressing Poly-victimization in a Family Justice Center Setting

The Office for Victims of Crime (OVC) is the federal government's effort to holistically address the national epidemic of trauma through their groundbreaking national demonstration initiative called "A Pathway to Justice, Healing, and Hope:

Addressing Polyvictimization in a Family Justice Center Setting." OVC recognized that the Family Justice Center model provides a unique opportunity to view victimization holistically, and work across

sectors to address trauma. The New Orleans Family Justice Center (NOFJC) was selected to participate with five other national Family Justice Center sites in New York, Oklahoma, Wisconsin, and two locations in California. Each site has partnered with a local research entity, and in New Orleans IWES was chosen as that partner. As a research partner, IWES worked closely with NOFJC to support their goals in the national Poly-victimization Demonstration Initiative.

While there is no single definition of "polyvictimization", it is generally described as having multiple victimizations of different kinds, such as sexual abuse, physical abuse, bullying, and/ or exposure to family violence, as opposed to experiencing a single form of victimization. The necessity to address poly-victimization is well understood at NOFJC, where it is widely known within the organization's service delivery that clients are currently experiencing or have endured multiple traumas within their lifetime. A major component of the Poly-victimization Initiative has been the collaborative development of the poly-victimization assessment tool. Currently in full implementation at NOFJC, the tool is an information integration tool intended to document past and current occurrences of victimization as experienced by the individuals NOFJC serves so that in turn, NOFJC can provide a timely, appropriate, and effective range of services to meet the needs of clients.

The NOFJC identified two overarching goals to accomplish in the three years of the initiative. One, to better understand the levels of poly-victimization

in their clients in order to provide improved services, and two, to create a holistic learning culture which informs the trauma field locally and nationally. In light of the previously mentioned goals, 2018 marked





the pilot of the poly-victimization assessment tool with clients, evaluation of staff clinical supervision with Dr. Denese Shervington, and evaluation of the holistic therapies offered to both staff and clients. The IWES Research & Evaluation team worked together with NOFJC to organize an evaluation plan based on a shared timeline for data collection, analysis, and sharing. In collaboration with the New Orleans Family Justice Center, IWES used the tool to assess clients and individuals at the

NOFJC, so that in turn, NOFJC can provide a timely, appropriate, and effective range of services to meet the needs of clients. Twenty-eight assessment tools were completed with 12 new and 16 returning clients during the piloting phase. At the conclusion of the piloting period, completed tools were shared with IWES' Research & Evaluation team for local, site-specific analyses and with key individuals overseeing the grant's research efforts to be included in cross-site analyses.



Interpersonal

(family, peers)

1 Research & Evaluation (R&E)

WE-CAN! Play, IWES' Attachment-Based Play Therapy Intervention

From 2014-2016, the W. K. Kellogg Foundation (WKKF) funded IWES to conduct the Wellness Evaluation Community Action

Network (WE-CAN!) project, which engaged youth, adult caregivers, elementary and middle school educators, and community experts/stakeholders in order to examine the factors that impact youth well-being in New Orleans. Among a myriad of other factors, the community experts/stakeholders identified *secure caregiver attachment* as a key issue impacting youth ages 0-8 years old in New Orleans, having lasting effects on emotional well-being and

resilience through adolescence and adulthood. A second round of WKKF funding for WE-CAN! - WE-CAN! 2 - was awarded in 2017 and included support for a school-based intervention to address specific areas of youth well-being identified in the previous round of funding.

IWES has developed WE-CAN! *Play*, an innovative school-based intervention that is trauma-informed, rooted in attachment theory, and informed by two attachment-focused interventions, Theraplay® and Trust-Based Relational Intervention®. In addition to working to counteract caregiver malattachment by building trusting relationships between youth and their educators, the program's emphasis on compassionate, trauma-informed classroom practices aims to also improve student outcomes across other dimensions of youth well-being identified in the first phase of WE-CAN!— *connection to school peers, caring relationships with school peers, and supportive adult relationships*.

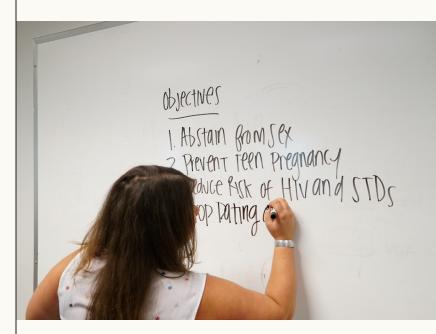
Through WE-CAN! *Play* staff provided training to 16 teachers and additional staff on traumainformed play therapy intervention at Foundation Preparatory Charter School, as well as ongoing one-on-one monthly consultation from IWES social workers throughout the year of implementation. Teachers at Foundation Prep also received material bins and activity manuals for the WE-CAN! *Play* intervention.

2 HIV Testing and Prevention (HTP)

Community Voice First: An Active Year for the HTP Community Advisory Board

The HTP Community Advisory Board (CAB) has been an important component of guiding the HTP strategy this year. The CAB consisted of a very diverse group of individuals who reflected the priority populations in some form or fashion. This included social media influencers, local artists, community activists, a representative of the local Office of Public Health and other individuals who represented populations most impacted by HIV in our community. The 13-member group met bimonthly as well as had one additional meeting that focused the CAB's role in utilizing social media to assist in promoting HTP programing. In addition, the CAB was charged with assisting the team in

identifying key community partners whom they had relationships with to assist HTP in reaching various subpopulations. Finally, another important role the CAB played was by being the body who reviewed all in-house generated materials for HTP such as the PROMISE Role Model Stories and the PrEP survey.



3 Collective for Healthy Communities (CHC) Two New Initiatives to Bring Targeted Mental Health Services to Unique

Populations

Creating A Truer Self (CATS) - The Creating a Truer Self (CATS) Program is a mental health and skills building workshop for girls ages 11-18. The primary purpose is to provide a safe space and opportunity to dive deeper into discussion and activities that promote healing from past trauma and improve the girls' ability to function positively in decision-making related to their physical and emotional health. CATS provides education and skill-building that encourages them to make responsible decisions through building self-esteem, recognizing healthy relationships, creating a positive self-image and learning the importance of nutrition and exercise.

CATS exceeded participant goals in 2018, reaching 231 girls through 12 community partnerships. Participants were from a variety of neighborhoods throughout the Greater New Orleans area and workshops were held in a multiple settings.



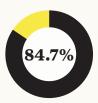
Of those who participated in the post survey:



reported an increased understanding of the difference between positive and negative coping skills.



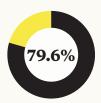
reported improved ability to recognize what can make friendships and relationships healthy and unhealthy.



reported an increased awareness of how mental and emotional wellbeing affects their overall health.



reported an increased awareness of the benefits of healthy nutrition and physical activity.



reported an increase in positive attitudes towards self-image and self-worth.

Women's Recovery Group - In partnership with Metropolitan Human Services District (MHSD), IWES social workers facilitated free Women's Recovery Groups (WRG) throughout the Greater New Orleans Area. The WRG promotes healing and personal growth for women seeking support in coping with substance use disorders and/or other behavioral health issues. Based on the curriculum created by psychiatrist Dr. Shelly Greenfield, the WRG is an outpatient weekly or monthly clinical service using evidence-based interventions in a therapeutic, trauma-informed setting.

In 2018 the Women's Recovery Group worked with 129 women at six sites (Algiers, Central City, New Orleans East, Chartres-Pontchartrain, St. Bernard, and Grace House's Camp St & Delachaise St. locations). Topics during the WRGs include: the effects of drugs on health; managing highrisk situations; obstacles to seeking treatment; managing mood and anxiety; using self-help to help yourself; coping with stress; achieving balance; women as caretakers; women's use of substances through the life cycle; violence and abuse; and reproductive health. One of the highlights of a successful year was the completion of the curriculum with four cohorts of women at Grace House, a local rehab for women with substance use disorders. IWES staff worked with MHSD clinic managers to establish a schedule to begin the WRG at their two locations.



Community

(organizations, schools, workplaces, neighborhoods)

1 Believe In Youth - Louisiana (BY-LA) BY-LA Expands its Reach to New Regions in Southeast Louisiana

Towards the end of June, IWES received approval to expand programming into Louisiana's Region 2 (Ascension, East/West Baton Rouge, East/West Feliciana, Iberville, Livingston, and Pointe Coupee Parishes) in response to high teen birth and STI/HIV rates among the priority population. Prior to this approval, BY-LA was only being implemented with youth in Region 1, which includes Orleans, Jefferson, Plaquemines and St. Bernard Parishes.

Through diligent outreach and recruitment efforts, IWES was able to forge a partnership with Family Road of Greater Baton Rouge (FRGBR), leading to further opportunities to expand BY-LA programming to other areas of Region 2 such as Ascension, East Feliciana, Iberville, Pointe Coupee, and West Feliciana. Two facilitators, one of whom

is bilingual, were hired to support implementation efforts in the area, expanding BY-LA's reach and access geographically and to the Latinx community. To ensure successful implementation, IWES trained FRGBR staff in the Making Proud Choices curriculum and Mandatory Reporting, which includes a component focusing on Teens, Sex, and the Law.

2 HIV Testing and Prevention (HTP)

HTP Goes Deeper into the New Orleans Community: Maintaining Over 21 Partnerships

During 2018 HTP staff collaborated with a wide variety of youth-serving community-based organizations as well as other organizations serving high-risk negative individuals. Staff had the opportunity to offer sexual health presentations in conjunction with free HIV testing with youth-serving organizations such as *Liberty's Kitchen* (a job readiness and youth development program), the

Juvenile Justice Court program, MELLO (a juvenile male divergent program), STRIVE NOLA and Future STRIVE (a re-entry and divergent job readiness program for youth). To effectively recruit youth for these events HTP staff incorporated relevant media into outreach and recruitment, which included screening clips from IWES' own risk web series. The series was helpful in engaging program participants and opening honest conversations about health practices, consent, and beliefs, including HIV testing. Other youth-focused partnerships include two local jails (the Orleans Parish Justice Center and the St. Bernard Jail), the Orleans Parish Juvenile Justice Center, and other community-based organizations that work with systems-involved vouth.

HTP not only expanded partnerships with youthserving organizations, but also found ways to reach new adult populations, as well. Partnerships were formed with the Keller Community Neighborhood Center, New Orleans Job Corps, and the Rebuild/ Harry Tompson Day Center. HTP participated in the Prison Collaborative, which consisted of organizations providing HIV support to the Orleans Parish Sheriff's Office. This has provided HTP the opportunity to promote both ARTAS and testing programming to key stakeholders involved in prison work in the community. Staff participated on the End the Epidemic Steering Committee as well as NOLA HIV/AIDS Awareness Week meetings, actively participating on the Social Marketing Committee. NOLA HIV/AIDS Awareness Week is a collaborative effort between community agencies, independent HIV/AIDS advocates, Louisiana Office of Public Health, and New Orleans Office of Health Policy that results in a series of HIV/AIDS awareness events in the Greater New Orleans area during the week of World AIDS Day. Two other local groups HTP worked with are the New Orleans Regional AIDS Planning Council (NORAPC) and Trystereo. Team members attended NORAPC meetings on local programs and efforts for services and programs for persons living with HIV and collaborated with Trystereo, which is a local grassroots communitylevel needle exchange program.

During the latter part of the year, HTP also began developing partnerships with the *Metropolitan Human Services District (MHSD)*, the largest behavioral health and substance abuse treatment

provider in the state. Additional new partnerships included, *SisterHeart Thrift Store*, *Walgreens Pharmacy - Crowder*, *NOLA Village/El Pueblo NOLA*, *and New Orleans Job Corps*. Finally, HTP also maintained and continued partnerships with *Walgreens - Gentilly* and *Walgreens - Elysian Fields*, as well as *Dillard* and *Xavier Universities*, by offering HIV testing and condom distribution during various special events.

4 Collective for Healthy Communities

(CHC) Learning through Listening: Community Members Shared How to Make New Orleans More Trauma-Informed at the In That Number Charrette

In 2016 IWES launched its In That Number campaign to raise awareness about trauma and advocate for more trauma-informed care services in the city. With "Sad, not Bad" as it's tagline, the campaign featured narratives and imagery detailing the impacts of trauma on local youth through multiple formats such as billboards, bus ads, social media storytelling, a website, Twitter chats, and in-person events. Seeing that the local community was sufficiently "primed" and provided information about trauma and how it shows up for young people, in 2018 IWES staff decided to launch a new phase of the public will campaign, yet this time as a social marketing campaign with direct Calls-To-Action to move from awareness to social change.

On December 8th IWES hosted a charrette to hear from community members about which sectors of our city would benefit the most from being more trauma-informed. Approximately 40 community members attended the event and participated in the following activities: narrative and creative storytelling about trauma; a trauma 101 presentation; a panel of community experts on trauma; personal exploration through figuring out one's own ACE scores (including processing with IWES mental health staff in small groups); and a brainstorm and card sorting activity to prioritize key sectors that need to be trauma-informed and suggest ideas and solutions. At the end of the event staff came away with three priority sectors attendees would like us to focus on for the new iteration of the campaign, as well as suggestions for actions that could be taken to make those sectors more trauma-informed.



Societal

(systems, sociocultural norms, policies)

1 Research & Evaluation (R&E)

The Catapult Study: The Global Early Adolescent Study (GEAS) in New Orleans

With support from the David & Lucile Packard Foundation and partnerships with the World Health Organization (WHO), Johns Hopkins University School of Public Health (JHUSPH), and research teams from around the world, the Institute of Women and Ethnic Studies (IWES) launched the Global Early Adolescent Study (GEAS) in New Orleans. The GEAS aims to "understand the factors in early adolescence that predispose young people to subsequent sexual health risks and conversely promote healthy sexuality, so as to provide the information needed to promote sexual and reproductive well-being." IWES aims to learn about the relationship and health issues young people face in their communities, how these issues are the same or different from what young people

experience in other parts of the world, and what can be done in New Orleans to help adolescents grow up healthy.

Among only a few sites globally that are providing an intervention alongside administration of the GEAS instruments created by JHUSPH, by conducting the GEAS in New Orleans IWES has created an opportunity to assess the effectiveness of Creating a Future Together (CrAFT), an IWES-created, trauma-informed sexual health curriculum. Unlike many other available curricula, this curriculum includes modules on emotional health and well-being and human rights and justice, as well as a focus on gender norms and expectations. The CrAFT curriculum will be evaluated against Making Proud Choices! (MPC), a widely utilized and replicated evidence-based adolescent reproductive health intervention that IWES has offered in New Orleans schools and community-based organizations since 2010.

2 HIV Testing and Prevention (HTP)

HTP Strategy: Beyond a Community-Level Intervention

Throughout 2018 HIV Testing & Prevention staff members attended multiple state and regional planning group meetings to stay up-to-date on new efforts and protocols, opportunities for collaboration, and state and national trends in HIV and STI rates. Staff participated in the first planning convening for "End the Epidemic," a statewide effort, and through the success of that participation staff have been asked to serve on the End the Epidemic Steering Committee as well as participate on the local Fast Track City Planning Collaborative. In an effort to continue to raise awareness of strategies to reduce rates of HIV infection, one of the HTP team members was also selected and featured in a nationwide "Greater Than AIDS" Pre-Exposure Prophylaxis (PrEP) campaign. Finally, one of the HTP team members received a scholarship to participate in the National Minority AIDS Coalition-sponsored Biomedical HIV Prevention Summit, which focuses on "the role that biomedical prevention tools such as PrEP, PEP, Treatment as Prevention (TasP), and U=U have in ending the epidemic," allowing for the sharing of new information and education on biomedical prevention with the rest of the IWES staff.

3 Collective for Healthy Communities (CHC) Annie E. Casey Family-Centered Community Change Partnerships in Three U.S. Cities

In 2018 CHC staff wrapped up their first year of work with the Annie E. Casey Foundation's Family-Centered Community Change (FCCC) initiative. This initiative focuses on a two-generation model to improve educational outcomes for children and assist parents with employment and educational opportunities. IWES staff traveled to Buffalo, New York, Columbus, Ohio, and San Antonio, Texas to learn more about their programs for adults, parents and children, and to evaluate their current program challenges.

In Buffalo, staff met with leadership and family coaches who work with families in the community

to provide financial literacy education, identify employment opportunities, and assist in résumé building for those on the job market. The IWES team facilitated dialogue on how best to sustain their programs and engage families to utilize their services by evaluating current program measures and outcomes. In Columbus, staff engaged with mental health professionals, educators, and the housing authority to learn about their housing and education programs geared toward low-income families. The IWES team developed strategies to incorporate trauma-informed initiatives at the school and community levels. In San Antonio, staff spoke with nurses, social workers, and educators and listened to emotional stories about traumatic experiences that both their clients deal with, and also themselves and their families. The IWES team was able to provide a safe space for staff to share their personal and work-related experiences and provide guidance on how best to manage their clients' needs while also taking care of themselves through self-care practices.

After conducting site visits at each city, IWES staff identified priority issues and created a technical assistance plan to address each issue for the 2019 fiscal year. Overall, staff identified a critical need for providing self-care and grief support, while also assessing the current capacity of mental health facilities in these cities, as trauma tends to be a recurring theme in these communities. In 2019 IWES will conduct an evaluation on the mental health needs, existing mental health resources, and access barriers within each city.



Appendix

Staff List

Jamie Balthazar Executive Assistant

Steffani Bangel, MPH Program Manager

Lucy Blumberg

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Ikeem George

Ashley Gothard

G'Kar Jackson

Nakita Shavers

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Briana White

Caitlin Wahlers

Funders











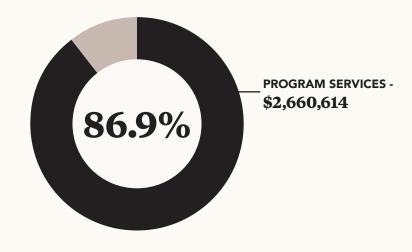


2017 Financials

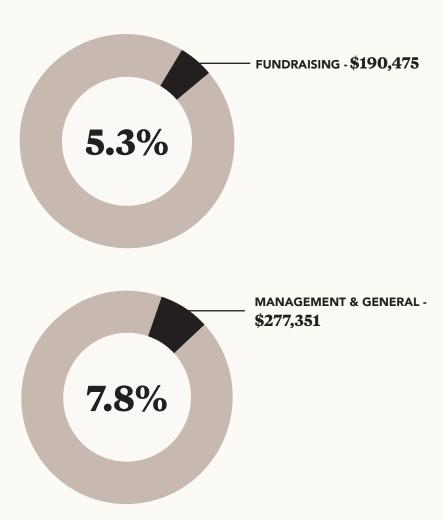
Statement of Activities

| SUPPORT AND REVENUES | UNRESTRICTED \$ | TEMPORARILY RESTRICTED \$ | TOTAL \$ |
|---------------------------------------|------------------|---------------------------|----------------|
| Federal grants | \$ 1,917,322 | -0- | \$ 1,917,322 |
| Private grants | 105,000 | -0- | 105,000 |
| Contributions | 6,082 | -0- | 6,082 |
| Contract income | 9,650 | -O- | 9,650 |
| Other income | 61,435 | -O- | 61,435 |
| Net assets released from restrictions | | | |
| Satisfaction of Program Restrictions | <u>1,658,704</u> | (1,658,704) | <u>-0-</u> |
| TOTAL REVENUES | 3,758,193 | (1,658,704) | 2,099,489 |
| EXPENSES | | | |
| Program services | 3,094,302 | -0- | 3,094,302 |
| Supporting services: | | | |
| Fundraising | 190,475 | -O- | 190,475 |
| Management and general | <u>277,351</u> | <u>-0-</u> | <u>277,351</u> |
| TOTAL EXPENSES | 3,562,128 | -0- | 3,562,128 |
| Change in net assets | 196,065 | (1,658,704) | (1,462,739) |
| Net assets, beginning of year | 318,312 | 3,183,614 | 3,501,926 |
| Net assets, end of year | \$ 514,377 | \$ 1,524,910 | \$ 2,039,287 |

Functional Expenses



SUPPORTING SERVICES





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