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WINTER | 2013

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN™



Iowa Chapter

The Heartland Pediatrician

Providing Trauma Informed Care: What Does It Really Mean?

Submitted by Jill Kluesner, MA, CRC, Technical Assistance Coordinator
University of Iowa Center for Child Health Improvement and Innovation



Trauma-informed care is “an **approach** to engaging people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives” (Substance Abuse and Mental Health Services Administration).

They key word in the definition is the word **approach**. Providing trauma informed care requires us to look at our individual behavior as well as the behavior, attitudes and environment of our offices, clinics, agencies and organizations. Several authors have identified ‘key components’ to providing trauma informed care. Below are components identified by Falot and Harris (2009), in addition to components identified by The National Council on Behavioral Health.

Consumer-Driven Services: Families and youth are the experts and key decision-makers of their care.

Screening and Assessment: Providers and practitioners are knowledgeable about the impact of trauma on overall health and therefore provide screening and assessment of trauma. Providers and practitioners shift their perspective from “*What’s wrong with you?*” to “*What happened to you?*”

Safe and Secure Environments: The environment in which services are provided is welcoming and inviting, allows for privacy, and considers the needs of each family and child served. Staff and clinicians also feel physical and emotional safety in the work environment.

Services and Practice Guidelines: Families and youth are provided choices about the services and supports they receive. Families and youth have a clear understanding of their rights and responsibilities.

Nurturing a Trauma-Informed and Responsive Workforce: All individuals within the organization have the opportunity to attend trainings to learn about trauma and the impact of trauma on the families and youth they serve. (con’t on page 4)



A Note from the Chapter President

This issue of our IA AAP newsletter highlights many of the wonderful activities and projects that our chapter has been involved with over the past year. The three goals of our chapter’s strategic plan are well represented in these activities and accomplishments: 1. Mobilize our membership; 2. Establish our leadership; and 3. Strengthen a system of care for Iowa’s children.

Our chapter collaborates with pediatricians across the state about the importance of appropriate development screening and incorporation of “Bright Futures” into daily practice. Our members participate on community and state workgroups and committees that are informing policy decisions that will improve children’s health and well-being. Our leadership has been involved in trainings (con’t page 3)

The 3rd Annual Iowa Pediatric Residency Advocacy Day Motivates Residents to Get Involved!

Submitted by Amy Shriver, MD, FAAP

Blank Children's Hospital

Friday, October 11 marked the 3rd annual Iowa Pediatric Residency Advocacy Day. This event, jointly sponsored by UICH Stead Department of Pediatrics, Blank Children's Hospital, and the Iowa AAP, brought together pediatric residents from the University of Iowa and the Blank Pediatric Residency program in Des Moines to educate residents on how to become pediatric advocates.

Twenty residents participated in the event, hosted this year at Blank Children's Hospital. The goals for the all-day event included: 1) understanding the concept "what is advocacy?" 2) developing competency in the basics of the legislative advocacy process in Iowa, 3) understanding how to access and use advocacy tools and other resources, 4) increasing an interest in participation in advocacy, and 5) discovering ways to incorporate advocacy into a future career in pediatrics.

Guest speakers for the day included Dr. Amy Shriver, Dr. Jennifer Groos, and Kathy Leggett (Blank Hospital), Dr. George Phillips (University of Iowa), David Adelman (Cornerstone Government Affairs,) and the keynote speaker, Dr. Denise Dowd from Kansas City Children's Hospital.



David Adelman describes Iowa's Legislative process and the 2014 session

The agenda covered topics such as "What is Advocacy?" "Introduction to the Legislative Process," and "Current Issues for Iowa's Children." Dr. Dowd shared her own experiences of learning about advocacy and provided residents with real-life examples of advocacy in action, including her role as primary author for the AAP's firearm injury prevention Policy statement.

Dr. Dowd's Grand Rounds lecture focused on the Adverse Child Events (ACEs) study and how that study impacts the way we practice pediatrics. All residents found the Grand Rounds

one of the most valuable and interesting parts of the day.

Residents spent the afternoon in smaller workshops focused on developing advocacy skills such as writing Op Eds, Talking with Legislators, and developing partnerships. Residents then discussed the most important learning points of the workshops to bring the day to a close.



Dr. Jennifer Groos leads residents through the day's debriefing

Advocacy mentors from both pediatric residency programs will follow up with residents regarding their personal and shared advocacy goals every 6 months. A post-participation survey will be administered at the end of the year to all participants of the Advocacy Day to assess continued learning/interest. Mentors will also encourage residents to attend the AAP/Blank Hospital Legislative Advocacy Breakfast on February 11th at 7 am on Capitol Hill. They will also receive email updates on the AAP Legislative agenda through the legislative season.



Residents listen to Advocacy Day speakers

Residents are also encouraged to apply for planning or implementation CATCH grants. The call for proposals is currently open and the deadline for submission is January 31. For more information, contact the Iowa AAP Chapter CATCH facilitator, Amy Shriver, MD. Amy.shriver@unitypoint.org.

Residents completed pre- and post- event surveys to assess their knowledge and interest in advocacy concepts. In just one day, scores on knowledge and interest in advocacy increased in all categories. On a scale of 1 (low comfort level) to 5 (very high comfort level), resident average knowledge scores increased in the following categories:

1. Knowing available community resources: 2.33 to 3.33
2. Collaborating with other professionals: 2.8 to 3.53
3. Working with advocacy groups/agencies: 2.5 to 3.53
4. Knowing what is being discussed in the Legislature: 2.13 to 3.6
5. Contacting your legislator: 1.93 to 3.87
6. Discussing child advocacy issues with decision makers: 2.13 to 3.6
7. Understanding how a bill becomes a law: 2.53 to 4.0
8. Understanding what CATCH grants are: 1.67 to 3.73
9. Writing an op ed or letter to the editor: 2.2 to 3.87
10. Working with the AAP to help children: 2.67 to 4.0

Resident average interest scores increased as follows:

1. I am aware of what can be done to meet the health promotion needs of my patient community: 2.93 to 3.73
2. It is important for pediatricians to interact and have a role with advocating for child health at the state or national level: 3.8 to 4.07
3. I know the community resources that are available for my patient community: 2.93 to 4.67

4. I found it valuable to learn about advocacy skills and concepts: 3.93 to 4.33
5. I find the Advocacy Curriculum to be well structured: 3.38 to 3.8
6. I am likely to meaningfully use this knowledge and these experiences and skills in my career after residency: 4.0 to 4.2

Residents were also asked to identify both personal and shared advocacy goals for the upcoming year. Here are some examples of shared goals:

1. I will be involved and know what is going on in the state
2. I will act upon my ideas for advocacy/quality improvement
3. I will get involved with the AAP—ant local gov't—will attend chapter meetings
4. I will write to my legislator
5. I will become involved in at least one advocacy project (illiteracy)
6. I will write to legislators on issues I am passionate about
7. I will write an op ed and consider submitting it

Save the Date!

Annual Legislative Breakfast
Tuesday, February 11, 2014
7:30 a.m. – 9:00 a.m.
Room 116 Capitol Building

ACA Implementation Resources for Pediatricians in Iowa

Submitted by AAP—Division of State Government Affairs

On October 1, 2013, open enrollment for individuals and families to sign up for health insurance in the new Affordable Care Act (ACA) marketplaces (formerly known as exchanges) began. The marketplace will allow people to compare and choose which type of health insurance plan will work best for their families. Public health insurance programs like Medicaid and the Children's Health Insurance Program (CHIP) are still available before, during, and after open enrollment. One streamlined application will make it easier to for people to find out which plan will best meet their needs.

New AAP Resource for Parents and Families of Patients

Making sure families are aware of the options available to them for pediatric patients through the marketplaces and what to look for in their insurance plans is extremely important. To help pediatricians assist their parents and families of patients navigate the marketplaces, the AAP has created state specific documents just for families. Every state, regardless of whether your marketplace is being managed by the state or federal government, has its own document with information regarding the marketplace.

The document linked below was designed to be distributed to parents, families, and young adult patients, so please disseminate them to your chapter membership to be used in their practices. You should also feel free to post them on your Web sites or circulate them in any manner you wish to be most beneficial to pediatricians and their patients and families.

<http://www.aap.org/en-us/advocacy-and-policy/Documents/Map/IA.pdf>

Resource for Pediatrician Business Small Business Owners

The ACA also provides health insurance coverage options for small business owners (those with 50 or fewer employees), such as pediatric practices. We are also providing you with an additional resource designed to assist your pediatrician members who qualify as small business owners. This state specific document, also attached to this e-mail, will help those pediatricians understand their options for covering their employees and discusses how they may possibly qualify for related tax credits. As Iowa will have a federally managed marketplace, this document is not state specific.

<http://www.aap.org/en-us/advocacy-and-policy/Documents/Universal.pdf>

All of these resources can be found at www.aap.org/ACAmarketplace. This site also includes an interactive map that includes links to the state specific, printable flyers for pediatric practices. Questions? Contact the AAP Division of State Government Affairs at stgov@aap.org or 847/434-7799 for more assistance.

A Note from the Chapter President

(con't from page 1)

and presentations on the developing neuroscience of the eco-bio-developmental model and the integration of trauma informed care.

Of equal importance are our workforce development activities with undergraduate and graduate student interns. These students have brought energy and enthusiasm to our IA AAP chapter offices. We are grateful for their participation.

At this time of thanks and celebration, I ask you to join me in acknowledging the wonderful contributions and leadership that our chapter has received from our Executive Director, Tess Barker, PhD, JD, and our Board of Directors. Their support, guidance, and expertise have been instrumental in our chapter's recognition as a champion for child health improvements in Iowa.

Happy Holidays and a Healthy New Year--

Debra



Congratulations to Iowa AAP Trustee, Dr. Pattie Quigley



*Dr. Rafael Hirsch, Chair, Stead Department of Pediatrics, (left)
Dr. Debra Schwinn, Dean of the College of Medicine (center)
Dr. Pattie Quigley (right)*

Photo taken from the awards ceremony

Each year the University of Iowa Carver College of Medicine hosts the Medical Education Celebration Day, which recognizes faculty members nominated by each academic department who play a key role in medical education. The faculty recognized at this event have significantly contributed to medical student education or gone above and beyond the requirements of his or her job over the past year. The 2013 awardees included Dr. Patricia Quigley, an Iowa AAP Board of Directors Trustee. Congratulations Dr. Quigley!

Providing Trauma Informed Care: What Does It Really Mean?

(con't from Page 1)

Community Outreach: The organization collaborates with a variety of community stakeholders. Providers and practitioners are knowledgeable of community resources.

To view the full document *Creating Cultures of Trauma-Informed Care (CCTIC): A Self-Assessment and Planning Protocol*, written by Robert D. Fallot and Maxine Harris (2009) visit <http://www.healthcare.uiowa.edu/icmh/documents/CCTICSelf-AssessmentandPlanningProtocol0709.pdf>.

For more information or to request training information, contact Jill Kluesner at jill-kluesner@uiowa.edu.

Trauma Informed Care: Tips for Pediatricians

Submitted by Mary Larew, MD, FAAP
Medical Director
Child Health Specialty Clinics



There are a number of ways pediatricians and other health care providers can integrate trauma informed care into their practice. In addition to learning more and helping create a culture of trauma informed care in your communities, here are some ways you can use the principles right now in your practice.

- 1. Screening and Assessment:** Be knowledgeable of the child and family's past medical history and identify risk factors for child and family distress prior to necessary examinations and procedures.
- 2. Ask. Listen. Validate.** Ask the child and family about their fears and concerns. Listen to the child's and family's concerns. Validate the child's and family's feelings.
- 3. Provide Information to Parents, Caregivers, Children and Adolescents:** There are many free resources available for parents, caregivers, children and teens on how to deal with trauma. The National Traumatic Stress Network (www.nctsn.com) has many downloadable brochures and handouts in both English and Spanish on topics including "At the Hospital: Helping My Child Cope", "After the Trauma-Helping My Child Cope" and many more titles.
- 4. Be knowledgeable of trauma-informed services and supports in your community.**

The information above was provided with support from the University of Iowa Center for Child Health and Innovation.



Jill Kluesner will present a free training at the University of Iowa College of Public Health in Iowa City. All are welcome to attend this free event.

SAVE THE DATE!

4th Annual Psychological Trauma & Juvenile Justice: Impact on Mind, Body, Behavior and Community Current Research and Practice Trends

JUNE 10 & 11, 2014

Featured speakers: Jen Agosti, Carly Dierkhising, Travis Lloyd Smith, Patrice Gaines, Lori Beyer, Jolene Philo

POST-CONFERENCE INSTITUTE: JUNE 12, 2014

Featuring: Sandra Bloom MD
and Trudy Townsend

****New Location: Holiday Inn****
6111 Fleur Drive, Des Moines, Iowa 50321

For more information please contact:
Nancy Boggess (nboggess@orchardplace.org)
515-246-3531



PROGRAM SPOTLIGHT: MIECHV

Iowa's Maternal Infant and Early Childhood Home Visitation (MIECHV) Program

Submitted by Caitlin Suginaka ~ State Home Visitation Quality Assurance Program Manager, Iowa Department of Public Health

Many families that walk into Iowa hospitals and clinics are faced with challenges that reach far beyond what can be fixed with antibiotics. A visit with a sick child may reveal a family's concerns about food insecurity, transportation, or lack of adequate housing. Home visitation, or family support, can augment the services that are provided in a healthcare setting. Family support programs vary in focus, duration, intensity, and design but all are equipped to assist families with young children with a wide range of needs. Currently within the state of Iowa there are 177 different family support programs across all 99 counties. Thanks to a federal grant known as the Maternal Infant and Early Childhood Home Visitation (MIECHV) program, through the Patient Protection and Affordable Care Act (PPACA), they are more widely available in the state of Iowa than ever before.

MIECHV has two main thrusts. First, MIECHV attempts to expand existing family support programs in Iowa's most at-risk counties. See the map for counties currently participating in the MIECHV program by expanding family support programming. The program models funded through MIECHV include Nurse Family Partnership, Healthy Families America, and Home-Based Early Head Start. Each of these models has a distinct focus and method of service delivery. All three are evidence-based and were determined to be highly effective at addressing the needs identified in the counties in which they are located.

The second main thrust of the MIECHV program in Iowa is the development of infrastructure that will positively impact family support programs throughout the state. These activities are not limited geographically. The main infrastructure building projects funded through MIECHV include coordination of family support research, development of a statewide data system, implementation of a comprehensive professional development plan for those working in the family support field, creation of a "virtual home visitor" to serve lower risk families, and development of a coordinated intake system.

Professionals in healthcare should pay close attention to the development of the "virtual home visitor" and the statewide coordinated intake process. These infrastructure building projects in particular will make family support services even more accessible and available to health professionals and families alike.

The "virtual home visitor" project is currently in a planning phase. It will be designed for lower risk families who may not be qualified for or may not be interested in a hands-on family support program. The system will be available online and will include access to basic developmental assessments, parenting education and support, opportunities for community building, and many other tools for caregivers. It will also be linked to the coordinated intake system. If certain high risk criteria are met, parents who do qualify for more intensive services can quickly be linked to programs in their area.

The purpose of coordinated intake is to provide a single point of entry for access, assessment, and referral to family support services. It will be structured with a local contact as well as a single statewide contact that will funnel referrals into the local system. In this way, busy physicians, social workers, or care coordinators do not have to know every local resource and every program's eligibility criteria to hook a family into a program

that is right for them. They will simply need access to one website or phone number. The process will begin with a brief screen to assess a family's strengths and needs, and information will be gathered that will assist with referral. At the local level, coordinated intake staff along with a team of local providers will determine the most appropriate services and supports. Several local communities have already developed processes for referral and these structures will continue to expand across the state. The statewide coordinated intake system that will link these local systems is under development and will be capable of accepting and providing referrals in 2014.

Locations of At-Risk Communities

yellow stars are MIECHV I and blue stars are MIECHV II



MIECHV was initially funded in Iowa using formula funds. Iowa then received a second round of funding through a competitive selection process. MIECHV I communities, or those initially funded, are marked with yellow stars. MIECHV II communities, those added after the competitive funds became available, are marked with blue stars.

Community Service Area	Contractor
Appanoose, Wapello	SIEDA Community Action
Black Hawk	Operation Threshold
Buena Vista	UDMO
Cerro Gordo	Lutheran Services of Iowa
Clinton, Muscatine, Scott	Lutheran Services of Iowa
Des Moines, Lee	Lee County Public Health
Hamilton, Webster	Hamilton Public Health
Jefferson	Lutheran Services of Iowa
Marshall	MICA
Montgomery, Page, Pottawattamie	Promise Partners
Woodbury	SHIP

For more information on MIECHV, please contact:
Janet Horras

State Home Visitation Director, Bureau of Family Health
515-954-0647 or janet.horras@idph.iowa.gov

MEET THE 2013-2014 INTERNS

Iowa AAP recognizes the importance of workforce development across all allied health programs. Iowa AAP strives to provide meaningful experiences and mentoring for future pediatricians and health care providers of our state, be it through formal CATCH grant mentorship and the Resident Advocacy Day events (see page 2), or through informal meetings with medical students considering pediatrics. Iowa AAP also intentionally writes opportunities for graduate internships into our grants and programs whenever possible.

This year, we have 6 graduate and medical students involved in the following projects:

- Allstate Foundation Safe Teen Driving Grant
- Healthy People 2020: Using Technology to Influence Adolescent Behaviors
- New York Life Foundation Pediatric Bereavement Grant
- CQI Project "First Tooth, First Brush"

If you are interested in providing a learning opportunity for a medical student, resident, or allied health care professional, please let us know by contacting Tess Barker, JD/PhD, Iowa AAP Executive Director at tbarker@aap.net.



Name: Ann DePriest
Hometown: St. Louis, Missouri
Undergraduate Institution and Degree: B.A. in Biology from Coe College (2012)
Current Program at University of Iowa: MPH in Community and Behavioral Health
UI Graduation Date: May 2014

Iowa AAP Project: Under the Healthy People 2020 Grant, I have helped create "Iowa's Health and Wellness Connection for Teens," a group of social media sites from which to deliver general health information to Iowa teens. Since September, we have been conducting focus groups with middle and high school students in Eastern Iowa to find out what health topics they believe are most important for students their age and have used that information to formulate our posts. We are using Facebook, Twitter, Instagram, and Pinterest to provide teens with health information on a variety of topics ranging from safe driving to nutrition to healthy relationships.

Why you are interested in your project OR children's health issues: I'm interested in adolescent health, so this project has been immensely helpful in helping me gain experience working with this population. This age is when we are able to start making some of our own formative decisions. I believe it is important to target adolescents when it comes to health information in order to set them up for a healthy future.

Anything else you'd like to note (future professional interests, other health-related experiences, etc): I'm primarily interested in the sexual and reproductive health of adolescents. After graduation, I plan on pursuing job opportunities in health education and health promotion.



Name: Joanna Krajewski, MPH
Hometown: Iowa City, Iowa
Undergraduate Institution and Degree/Graduate Institution and Degree: University of Iowa, College of Liberal Arts: BA in Communication, gender studies emphasis, and minor in Art (2007); University of Iowa, College of Public Health: MPH in Community and Behavioral Health (2013)
Current Program at University of Iowa: University of Iowa, School of Journalism and Mass Communication: First-year PhD student focusing in Health and Water Communication

Iowa AAP Project: Assisting with research and writing of the Iowa AAP Policy Statement/Conference Proceeding report from the 2013 Youth and Violence conference.

Why you are interested in your project OR children's health issue? I have always been interested in children's health; but my two study abroad experiences during my MPH program helped solidify my research passion in evaluating and designing communication campaigns and educational programs for children in developing countries—especially regarding water, hygiene, and sanitation. Correspondingly, being in mass communication studies now, I have recently become interested in the profound effects, and societal implications of the mass media on children (i.e. violence and TV, or cyber bullying on social networking sites). I hope to embark on research in the future regarding the use of mass media and communication technologies in environmental health education for elementary age students.



Name: Rachel Nash
 Hometown: West Chicago, Illinois
 Undergraduate Institution and Degree/Graduate Institution and Degree (if completed): University of Iowa, B.S. Integrative Physiology
 Current Program at University of Iowa: University of Iowa College of Public Health, MPH Program (Community and Behavioral Health)
 UI Graduation Date: May 2014

Iowa AAP Project: Help Me Grow: Early Screening and Surveillance Social Media Campaign (Spring 2013) - presenting at Associations of Maternal and Child Health Programs in January. Assisting with research and writing of the Iowa AAP Policy Statement/Conference Proceeding report from the 2013 Youth and Violence conference. Why you are interested in your project OR children's health issues I have always had a strong interest in children's health issues, stemming from my volunteer experience at UI Children's Hospital on the Pediatric Oncology and Bone Marrow Transplant Unit. In addition, I have a strong background in Public Relations and enjoy using social media creatively. My project allowed me to combine these two passions – children and health communication – into one interesting project with a lot of lessons learned for AAP. The pediatric bereavement project was something I just had a genuine interest in, and it was wonderful to have the opportunity to accompany Dr. Schonfeld to his meetings during his visit to Iowa. I think our paper will have important implications and recommendations for pediatricians, caregivers, educators, and policymakers. Anything else you'd like to note? I am currently an Iowa Leadership in Neurodevelopmental and Related Disabilities (ILEND) trainee through the Center for Disabilities and Development, a yearlong fellowship to learn how to become a leader and advocate for children and youth with special health care needs. I also will work with the Iowa Primary Care Association for my capstone public health project to develop a toolkit for PCPs to use when transitioning pediatric patients into adult care. In the future, I plan to go to medical school to become a pediatrician and hope to continue to do what I can to ensure the health and wellness of Iowa children.



Name: Dan Pelzer, MD
 Hometown: Tipton, Iowa
 Undergraduate Institution: University of Northern Iowa, BA in Biology
 Medical School: University of Iowa Carver College of Medicine
 Residency: Second-year pediatrics resident at the University of Iowa Children's Hospital

Name: Diana Pelzer
 Hometown: Bettendorf, Iowa
 Undergraduate Institution: University of Iowa, BA in Health Sciences
 Dental School: I'm a fourth-year student at the University of Iowa College of Dentistry and Dental Clinics and am currently applying to residency programs in pediatric dentistry.

Iowa AAP Project: First Tooth, First Brush: Engaging Resident Pediatricians in Oral Health Education
 Pediatricians identify that performing oral health assessments is beneficial but commonly note a lack of training in the subject. Our goal is to develop an educational program for pediatric residents that 1) outlines the basic steps of infant oral health screening, 2) presents essential information about dental and oral development, fluoride, teething, and brushing strategies for infants, and 3) encourages oral health education within the context of routine well-child exams. Why you are interested in your project? We have always wanted to combine our educational training and advocacy interests to benefit the children of our home state. Anything else you'd like to note? We met while volunteering at UIHC and tied the knot four years later in the summer of 2013!



Name: Lena Thompson
 Hometown: Sigourney, Iowa
 Undergraduate Institution and Degree: International Relations, Drake University (2011)
 Current Program and University of Iowa: Community and Behavioral health at the University of Iowa College of Public Health
 UI Graduation Date August 2014

Iowa AAP Project Allstate Foundation "Teen Safe Driving" Social Media Campaign. This semester, I have been able to work with the AAP on the Teen Safe Driving Grant Program to create a social media project encouraging safe teen driving. In collaboration with my classmate Ann DePriest, we have created the Iowa Health and Wellness Connection for Teens (IHAWC), which is an online coalition that aims to connect teens with health information on Facebook, Twitter, Pinterest, and Instagram. This October and November, I am also helping Iowa AAP host a photo contest where teens are taking pictures showing their safe driving moments such as putting on a seatbelt or storing their cell phones in the glove compartment. I have been so excited to be part of the IHAWC and Safe Driving Moment photo contest projects with the AAP! Anything else you'd like to note? I am interested in working with adults with intellectual disabilities to improve nutritional habits. I plan to apply for fellowships and other programs that will help explore my interests in human rights and intellectual disabilities.

Healthy People 2020 Update

In summer 2013, the Iowa Chapter was awarded a Healthy People 2020 grant to address promoting health behaviors in Iowa teens using health communication and social media. Our goal is to create engaging and educational social media platforms to address health literacy and healthy behaviors among Iowan 12-18 year olds. The health topics and target groups that were identified within the grant are: overweight adolescents/adolescents at-risk for obesity, adolescent girls using indoor tanning beds, adolescents using performance enhancing drugs/substances, adolescents with body issues/body concerns, adolescents at-risk for bullying or hazing, potential for flu exposure, consumption of alcohol/tobacco/other drugs, and adolescent sexual health issues.

To fulfill the purposes of this grant, we have created **“Iowa’s Health and Wellness Connection for Teens”** or iHAWC for short. There are four main social media sites associated with the project: Facebook, Twitter, Instagram, and Pinterest. In order to shape what we post, we have been conducting focus groups with 7th-12th graders at Sigourney and Clear Creek Amana schools, as well as Unit-Action for Youth in downtown Iowa City, to see what they think are the most important health

topics we should be focused on. Our Facebook and Twitter pages are primarily used to share health tips and information through links to other websites and videos. Our Instagram and Pinterest pages are being used to provide followers with infographics and concrete examples of how they can incorporate healthy practices into their daily lives.



Sample Pinterest Board. Additional Pinterest boards focus on fitness, stress management, nutrition, and other healthy habits.

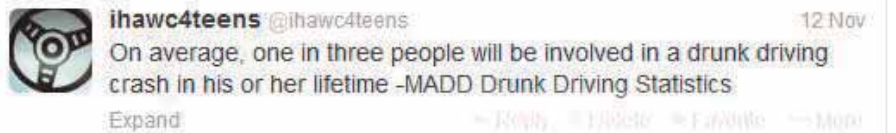


How You Can Help:

- “Like” and “Follow” our pages!
- Submit information and ideas for posts to ihawc4teens@gmail.com
- Encourage your patients to follow us!



Jenna, an Iowa high school sophomore, won the October “Safe Driving Moment” with this photo. Special thanks to The Allstate Foundation for their support of Iowa’s teen drivers.



The Teen Safe Driving Grant Program, sponsored by the Allstate Foundation, was awarded to Iowa AAP in 2012-2014. The \$30,000 grant award was used to promote safe teen driving through advocating for stronger Graduated Driver Licensing (GDL) laws. As a part of this effort, strengthened driving laws will go into effect in Iowa on January 1, 2014. To further encourage safe teen driving in Iowa, the Teen Safe Driving program collaborated with the Healthy People 2020 social media campaign. Through posts on the iHAWC Facebook, Twitter, Instagram, and Pinterest pages, we have shared information about GDL laws, offered facts about teen driving, and given tips to parents and teens about how to safely integrate driving into teens’ lives.

In addition to the posts on the social media websites, the AAP is also hosting a “Safe Driving Moment” photo contest for teens. Teens “like” the iHAWC Facebook page and download the safe driving steering wheel logo. They then take a photo demonstrating their safe driving moments, such as buckling their seatbelts, clearing snow from their windshield, or looking straight ahead at the road. After uploading their photos on the iHAWC Facebook Contest page, teens vote for their favorites. The teen who submits the photo with the most votes wins a \$100 Visa gift card while two runners-up each receive a \$50 Visa gift card. The photo contest had 19 participants in the month of October with a second round held in November. This November, Iowa AAP will visit high schools and encourage teens to take photos on the spot using toy cars, a marker board, and the safe teen driving steering wheel logo.

How You Can Help:

- Submit a photo to the “Safe Driving Moment” contest!
- Vote for your favorite photo on the contest page (on.fb.me/1aEerj2)
- Encourage your patients to develop safe driving habits!

The hope for this contest is that teens will get a chance to really think about what they do to keep themselves safe on the road. At the high school visits, teens will get a chance to engage in conversations about what it means to be a safe driver and learn about the new GDL laws in Iowa.

***Iowa Rural Physician
Loan Repayment Program
Receives \$1M Funding***



On December 6, Governor Terry Branstad and other elected officials announced a \$1 million commitment over several years to help fund the program at a press conference at the University of Iowa Carver College of Medicine. The program will provide funds to 10 students from the University of Iowa and 10 students from Des Moines University who commit to practice for at least 5 years in a rural, low population community. Pediatricians are eligible providers in this program. Iowa AAP was present at the event in appreciation for how this program can address pediatrician shortages across Iowa.

UPCOMING EVENTS

Iowa AAP Legislative Breakfast
February 11
Room 116, Capitol Building
Des Moines

**Visit by Dr. James Perrin
AAP President**
February 27— Des Moines
February 28—Iowa City

Iowa AAP All Member Survey

All Iowa AAP members with an email address on file will soon be receiving an all-member survey. In an effort to maximize membership value and include membership in chapter decision making, we are seeking input from all members about your interests and priorities. The survey should take less than 15 minutes to complete .

Thanks for completing the survey!

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN™



Iowa Chapter

**2013—2014
Board of Directors**

Contact Us!

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