

# the primer



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## Welcome

As members of the National Initiative, we share a common set of goals:

- Elevate national, state, and community focus on, and commitment to, the health, safety, positive development, and well-being of adolescents, young adults and their families.
- Increase adolescents' and young adults' access to quality health and safety education and health care, including comprehensive general health, oral health, mental health, and substance abuse prevention and treatment services.
- Address the influence of social determinants on adolescent and young adult health, safety and well-being.
- Improve health and safety outcomes for adolescents and young adults in such areas as mortality, unintentional injury, violence, oral and mental health, tobacco and substance use, reproductive health, nutrition and physical activity, and the prevention of adult chronic diseases.
- Eliminate disparities of health, safety and well-being among adolescents and young adults in order to achieve equity.

## How to use this primer

The Primer is a collection of and source for NIIAH communications materials intended to support your work in achieving NIIAH goals. Use this document to review what options are available to you, then use the enclosed CD to access the digital materials referenced here. Feel free to adapt the materials to suit your needs, but try not to stray too far from the core messages. Throughout the document you will find sidebar information titled: **applied**. Use this to learn more about the practical application of the information and materials provided to you here.

## Contacts

Promoting the National Initiative and its work is an important aspect of being a partner or affiliate. A complete contact list of NIIAH partners and affiliates is included in our Operations Manual – listed below are some key contacts that are available to answer questions specifically about NIIAH and communications materials.

### Federal Leaders

Health Resources and Services  
Administration, Maternal and Child Health  
Bureau/Office of Adolescent Health  
Trina Anglin  
301-443-4291  
TAnglin@hrsa.gov

Centers for Disease Control and  
Prevention, Division of Adolescent Health  
Kari Gloppen  
770-488-6290  
kmg6@cdc.gov

### Communications Workgroup

Glynis Shea  
State Adolescent Health Resource Center  
University of Minnesota  
612-624-3772  
sheax011@umn.edu

### Partnership Workgroup

Shelli Doll  
National Center for Child Death Review  
Michigan Public Health Institute  
sdoll@mphi.org  
517-324-7392

Maureen Fitzgerald  
CityMatCH  
University of Nebraska Medical Center  
402-561-7514  
mfitzger@unmc.edu



# fact sheets

A concise overview of the National Initiative is available in fact sheet format. These fact sheets function as an outline of talking points you can use to introduce an audience to the National Initiative – and the importance of adolescent health. Fact sheets headings include:

- What is the National Initiative
- Why the focus on adolescence and young adulthood
- Health is more than the absence of problems
- Healthy People 2010 and the 21 Critical Health Objectives
- Resources and Tools
- NIAH partners and affiliates
- 21 Critical Health Objectives

Two versions of the factsheet, each oriented to different audiences/uses, are available.

## General Audiences – V.1

This version of the fact sheet is organized to promote NIAH's approach to adolescent health and frame NIAH as a resource for the youth-serving community – from any sector.

### The National Initiative to Improve Adolescent Health by the Year 2010

*Improving the health of adolescents and young adults is a priority for the United States. The National Initiative provides a unique opportunity for policy makers, health professionals, community members, adolescents, young adults and their families to collectively address the issues that affect the health of our nation's youth ages 10 to 24.*

#### Why the focus on adolescence and young adulthood?

Good health (physical, emotional, social and spiritual well-being) enables young people to make the most of these years while laying a strong foundation for adult life. Lifestyle behaviors developed during adolescence have immediate consequences that often continue into adulthood. These behaviors influence short- and long-term prospects for health, educational attainment, risk of chronic disease, and quality of life. Investment in the health of youth has long-term benefits.

#### What is the National Initiative?

The National Initiative to Improve Adolescent Health by the Year 2010 (NIAH 2010) or The National Initiative is a collaborative effort to improve the health, safety, and well-being of adolescents and young adults (ages 10-24). The Initiative was launched and is led by two federal agencies.

- Centers for Disease Control and Prevention's Division of Adolescent and School Health (CDC/DASH)
- Health Resources and Services Administration's Maternal and Child Health Bureau's Office of Adolescent Health (HRSA/MCH/OAH)

In conjunction with these federal agencies, a group of working partners helps to sustain the National Initiative (see next page for complete list).

#### Goals of the National Initiative

Working as a collaborative, the National Initiative partners have identified goals to guide their work:

- Elevate national, state, and community focus on, and commitment to, the health, safety, positive development, and well-being of adolescents, young adults and their families.
- Increase access to quality health and safety education and health care, including comprehensive general health, oral health, mental health, and substance abuse prevention and treatment services.
- Address the influence of social determinants on health, safety and well-being.

- Improve health and safety outcomes in such areas as mortality, unintentional injury, violence, oral and mental health, tobacco and substance use, reproductive health, nutrition and physical activity, and the prevention of adult chronic diseases.
- Eliminate disparities of health, safety and well-being among adolescents and young adults in order to achieve equity.

#### Healthy People 2010 and the Critical Objectives

The 21 Critical Health Objectives at the heart of the National Initiative are derived from Healthy People 2010 – a comprehensive set of national disease prevention and health promotion objectives that measure the nation's progress over time. Using these objectives, a national consensus panel focused the National Initiative on 21 objectives based on the critical nature of the health issue as well as the availability of state data.

#### The 21 Critical Health Objectives for Adolescents & Young Adults

##### Mortality

- Reduce deaths

##### Unintentional Injury

- Reduce deaths caused by motor vehicle crashes
- Reduce deaths and injuries caused by alcohol- and drug-related motor vehicle crashes
- Increase use of safety belts
- Reduce the proportion who report that they rode with a driver who had been drinking alcohol

##### Violence

- Reduce homicides
- Reduce physical fighting among adolescents
- Reduce weapon carrying on school property

##### Mental Health & Substance Abuse

- Reduce the suicide rate
- Reduce the rate of suicide attempts that require medical attention
- Reduce the proportion of those with disabilities who are reported to be sad, unhappy, or depressed
- Increase the proportion of those with mental health problems who receive treatment
- Reduce the proportion engaging in binge drinking of alcoholic beverages
- Reduce past-month use of illicit substances (marijuana)

##### Reproductive Health

- Reduce the number of new HIV diagnoses
- Reduce the proportion with Chlamydia trachomatis infections
- Increase the proportion who abstain from sexual intercourse or use condoms if sexually active

##### Prevention of Chronic Diseases

- Reduce tobacco use
- Reduce the proportion who are overweight or obese
- Increase the proportion who engage in vigorous physical activity that promotes cardiorespiratory fitness 3 or more days per week for 20 or more minutes per occasion

## Potential Partner/Affiliate – V.2

This version of the fact sheet offers a direct and linear description of NIAH and its adolescent health focus. It is more suitable for describing NIAH to for networking purposes. Uses might include recruiting partners or affiliates, creating relationships for resource sharing, or recruiting staff, faculty or students.

### The National Initiative to Improve Adolescent Health by the Year 2010

*Improving the health of adolescents and young adults is a priority for the United States. The National Initiative provides a unique opportunity for policy makers, health professionals, community members, adolescents, young adults and their families to collectively address the issues that affect the health of our nation's youth ages 10 to 24.*

#### Why the focus on adolescence and young adulthood?

Good health (physical, emotional, social and spiritual well-being) enables young people to make the most of these years while laying a strong foundation for adult life. Lifestyle behaviors developed during adolescence have immediate consequences that often continue into adulthood. These behaviors influence short- and long-term prospects for health, educational attainment, risk of chronic disease, and quality of life. Investment in the health of youth has long-term benefits.

#### Health is More than the Absence of Problems

To address the complex nature of the health challenges facing adolescents and young adults, the National Initiative prioritizes two key strategies:

- Fostering healthy youth development; and
- Ensuring safe, nurturing environments that help young people make healthy decisions. This perspective defines health as more than the absence of health problems and includes well-being, assets and achieving one's full potential as an integral part of health. The National Initiative recognizes that choices of individual young people are shaped by the world around them. Families, schools, communities and public policies influence behavior. While young people are learning to make responsible decisions, adult society bears responsibility for the world in which adolescents make these choices.

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In conjunction with these federal agencies, a group of working partners helps to sustain the National Initiative.

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Working as a collaborative, the National Initiative partners have identified goals to guide their work:

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- Address the influence of social determinants on health, safety and well-being.
- Improve health and safety outcomes in such areas as mortality, unintentional injury, violence, oral and mental health, tobacco and substance use, reproductive health, nutrition and physical activity, and the prevention of adult chronic diseases.

- Eliminate disparities of health, safety and well-being among adolescents and young adults in order to achieve equity.

#### Working Partners & Affiliates of the National Initiative

##### Academic Institutions

- Building Partnerships for Health: University of Arizona in partnership with the National 4-H Council
- Center for Adolescent Nursing, School of Nursing, U of MN
- Leadership Education in Adolescent Health (LEAH) Program
- Baylor College of Medicine
- Baylor Children's Hospital / Harvard Medical School
- Indiana University Medical Center
- Johns Hopkins University, School of Medicine
- University of California, San Francisco School of Medicine
- University of Minnesota, School of Medicine
- University of Rochester, School of Medicine
- National Adolescent Health Information Center (NAHIC), UCSF
- Public Policy Analysis & Education Center for Middle Childhood, Adolescent & Young Adult Health, UCSF
- State Adolescent Health Resource Center for Maternal and Child Health, U of MN
- School Mental Health Program and Policy Analysis Centers
- University of California, Los Angeles
- University of Maryland, Baltimore

##### National Organizations

- Center for Applied Research and Technical Assistance (CARATA)
- Children's Safety Network, National Injury and Violence Prevention Resource Center, Education Development Center
- National Center on School-Based Health Care, National Assembly on School-Based Health Care
- National MCH Center for Child Death Review Policy and Practice, Michigan Public Health Institute
- Partners in Program Planning for Adolescent Health (PPPAH)
- American Academy of Pediatrics
- American Bar Association
- American College of Preventive Medicine
- CityMed41
- Healthy Teen Network
- National Association of County and City Health Officials
- National Conference of State Legislatures
- National Institute for Health Care Management Foundation
- Partnership to Promote Adolescent Health in States, Association of Maternal and Child Health Programs (AMCHP)
- National Network of State Adolescent Health Coordinators (NNSAHC)
- Society for Adolescent Medicine

# applied

## Hand-out!

Fact sheets are a versatile tool for promoting NIAH's work as well as the work of your own organization. To be effective, a fact sheet must land in the hands of another person – this is a job for all NIAH members.

Following are some tips for making sure the fact sheet gets used:

- Maintain a stock of 20 fact sheets in a convenient location.
- Bring 5 copies to each event, conference or large meeting you attend to hand out when networking.
- Include the fact sheet as literature on booths or display tables at relevant events.
- Use the fact sheet as a hand out when you are presenting or conducting trainings on adolescent health.

# attribution statements

## Organizational Attribution Statements

Use this language to indicate that your organization is affiliated with the National Initiative. Note that you must insert the name of your own organization.

### Recommended

*[Name of your organization]* is one of over 25 partners and affiliates leading the National Initiative to Improve Adolescent Health, a collaborative effort facilitated by two federal agencies to improve the health, safety, and well-being of adolescents and young adults.

### Options

*[Name of your organization]* is an active partner/affiliate in the federally-facilitated National Initiative to Improve Adolescent Health.

*[Name of your organization]* is a partner/affiliate in the National Initiative to Improve Adolescent Health, a collaborative effort facilitated by two federal agencies to improve the development, health, safety, and well-being of adolescents and young adults.

*[Name of your organization]* is a contributing partner/affiliate in the National Initiative to Improve Adolescent Health.

*[Name of your organization]* is one of over 25 partners and affiliates leading the National Initiative to Improve Adolescent Health.

## Product Attribution Statements

Use this language to indicate that a product your organization developed is affiliated with the National Initiative. Chose from either option listed below. Alternately, you may chose to identify your organization's affiliation and forgo any specific product attribution.

### Option 1

This *[name or type of product]* was created in support of the goals of the National Initiative to Improve Adolescent Health, a collaborative effort to improve the development, health, safety, and well-being of adolescents and young adults. The National Initiative is facilitated by HRSA/MCHB's Office of Adolescent Health and CDC's Division of Adolescent and School Health.

### Option 2

This *[name or type of product]* was created as part of the National Initiative to Improve Adolescent Health, a collaborative effort facilitated by two federal agencies to improve the development, health, safety, and well-being of adolescents and young adults.

## applied

### attributable

Example of a NIIAH attribution statement used by SAHRC for "e-adolescence."

### e-adolescence

e-adolescence is a listing of on-line resources for state MCH professionals working to promote adolescent health, safety and well-being. We encourage you to share this information with others.

This e-newsletter was created by the State Adolescent Health Resource Center in support of the goals of the National Initiative to Improve Adolescent Health by the Year 2010 (NIIAH) which strive to improve the development, health, safety and well-being of adolescents and young adults. The National Initiative is facilitated by HRSA/MCHB's Office of Adolescent Health and CDC's Division of Adolescent and School Health.

The information contained in this ...

# descriptive paragraphs

Use this language to describe what the National Initiative is and what it does. It is important that this language remain consistent; please do not adapt unless absolutely necessary. When possible, included the more detailed description of NIIAH's federal facilitators.

## Option 1

The National Initiative to Improve Adolescent Health by the Year 2010 is a collective effort to improve the health, safety, positive development and well-being of adolescents and young adults (ages 10-24). Facilitated by two federal agencies, NIIAH partners and affiliates collaborate to:

- Elevate the focus on and commitment to the health, safety, positive development, and well-being of adolescents, young adults and their families.
- Increase access to quality health and safety education and health care.
- Address the influence of social determinants.
- Improve health and safety outcomes.
- Eliminate disparities in order to achieve equity.

## Option 2

Facilitated by HRSA/MCHB's Office of Adolescent Health and CDC's Division of Adolescent and School Health, the National Initiative to Improve Adolescent Health by the Year 2010 unites over 25 partners and affiliates working to improve the healthy, safety, positive development and well-being of adolescents and young adults.

## applied

### Call-Out Box

A simple way to include a reference to the National Initiative in newsletters or other lengthy documents is through a stand alone box of text or side bar using the NIIAH description.

### Suggestions

- Adapt or create your own headline for greater consistency with your own editorial.
- Include the NIIAH logo for greater visual emphasis.
- Include a visual of your own product as a way to associate it with NIIAH.

### What is NIIAH?

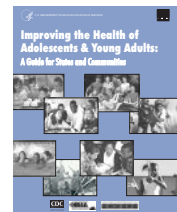
The National Initiative to Improve Adolescent Health by the Year 2010 is a collective effort to improve the health, safety and well-being of adolescents and young adults. Facilitated by two federal agencies, NIIAH partners and affiliates collaborate to:

- Elevate the focus on and commitment to the health, safety, positive development, and well-being of adolescents, young adults and their families.
- Increase access to quality health and safety education and health care.
- Address the influence of social determinants.
- Improve health and safety outcomes.
- Eliminate disparities in order to achieve equity.



### NAHIC & NIIAH

Facilitated by HRSA/MCHB's Office of Adolescent Health and CDC's Division of Adolescent and School Health, the National Initiative to Improve Adolescent Health by the Year 2010 unites over 25 partners and affiliates working to improve the healthy, safety positive development and well-being of adolescents and young adults.



As a NIIAH partner, the National Adolescent Health Information Center is proud to create resources that support the goals of the Initiative, including Improving the Health of Adolescents: A guide for states and communities.

Download the guide at

[www.nahic.ucsf.edu/guide](http://www.nahic.ucsf.edu/guide)

# elevator pitch

An elevator pitch (or elevator speech) is a term used to describe a well-thought out overview or explanation of your organization, product, service – or in our case – Initiative. The term “elevator pitch” refers to the idea that you should be able to deliver your entire pitch in the time it takes to ride in an elevator (30 seconds).

Elevator pitches were popularized during the tech boom of the ‘90s when engineers and software developers sought venture capitalists to fund their ideas. Since most technology concepts are fairly complicated, they needed to be able to make a short, clear and compelling case.

There are many formulas for creating an elevator pitch; most agree that the pitch should cover at least three points:

- Why the person you are talking to should care (that is, the benefit)
- What you or your organization (or Initiative) does
- What makes it special or different

It is also a good idea to be prepared with an “ask” or “call to action.” This is a way to move your elevator pitch from monologue to interaction. An “ask” engages your audience and encourages their participation. Examples of “asks” are listed in the **applied** sidebar.

## Elevator Pitch Outline

1. Young people are frequently forgotten and/or treated as “trouble.”
2. NIIAH exists to support young people in becoming healthy and productive citizens by focusing on their development, health and safety.
3. Accomplishing this requires improving access to quality health care and addressing dramatic health disparities and increasing health equity.
4. NIIAH is led by two federal partners: CDC/DASH and HRSA/MCHB/OAH
5. They coordinate the efforts of over 25 partner and affiliate organizations that collaborate to make sure adolescent development, health and safety stays on the national agenda.

## Elevator Pitch Example

Adolescents are an overlooked population when it comes to public health. And when they are remembered, most interest focuses on the negative issues surrounding them, like drugs, pregnancy or violence.

The National Initiative to Improve Adolescent Health exists to keep the positive attention on adolescents and support them in becoming healthy and productive citizens. Over 25 partner and affiliate organizations collaborate to improve adolescent health and safety, increase access to quality healthcare and improve health equity.

NIIAH is unique in that two federal partners – CDC/DASH and HRSA/MCHB lead the Initiative and coordinate the working partners and affiliates.

Want to know more?

## applied

### Be “ask” ready

If you’ve gone to the trouble of preparing and memorizing an elevator pitch, make the most of the opportunity by asking your listener questions, engaging them in conversation or asking them to get involved. By finding out more about your listener, you are better able to see connections and opportunities for collaboration.

- Can I send you more information?
- Are you working on any adolescent health projects?
- Have you heard of NIIAH before?
- Do you receive any federal funding?
- How do you integrate healthy youth development?
- What are your critical adolescent health objectives?
- Are you interested in joining the Initiative?
- What adolescent health resources do you need most?
- How do you use Healthy People 2010?

# NIAH listservs

## What is a listserv?

A listserv is an electronic mailing list that allows email discussion among a group of people with a similar interest. A listserv allows you to send one message that is distributed to all members of the listserv.

## Why use a listserv?

A listserv is a wonderful way to share and access our collective knowledge. Examples of ways that members use Listservs include:

- Seeking specific resources (For example: Anyone know a speaker? Have a best practice for \_\_\_\_\_? Etc.)
- Identifying people who have expertise in an area that you need help with (e.g., developing an advisory council, consolidating youth data surveys, etc.).
- Identifying other members with similar interests or scope of work.
- Sharing resources that a member has found to be helpful.
- Announcing some product, accomplishment or event that others might find of interest (e.g., a media campaign, a community meeting, a fact sheet, a training curriculum).
- Announcing meetings that others may be interested in.
- Posting a question for discussion.

## What listservs does NIAH use?

NIAH currently uses two different listservs. One for the entire NIAH partnership and one for the Volunteer Leadership Team (VLT).

### NIAH Partners

Address: NIAHPartner@listserv.app.org  
 Owner: AAP  
 Contact: Charlotte Zia — CZia@aap.org  
 Identifier: [niah]

### NIAH Volunteer Leadership Team (VLT)

Address: NIAHLeaders@lists.ucla.edu  
 Owner: UCLA  
 Contact: Perry Nelson — smhp@ucla.edu  
 Identifier: [Niahleaders]

## How do I use the listserv?

**Subscribing.** As a NIAH member, you are automatically subscribed to the NIAH Partner listserv. You'll know that you have been subscribed when you receive an e-mail message stating that you've been added to the mailing list (listserv) by the AAP, which hosts the listserv. If you'd like to join the Volunteer Leadership Team, you will be added to that listserv, as well.

**Sending a message.** Compose a message as you normally would. To send the message, type in the listserv address (to reach all partners and affiliates: NIAHPartner@listserv.app.org) in the "To" line of your email and send the message. Your e-mail message is sent to a single address and the listserv distributes it to all subscribers on the list.

**Identifying a listserv message.** You can identify a listserv message by looking at the subject line of the email. Listserv messages always include an "identifier" in square brackets [niah] that indicates which list generated the message.

**Responding to messages.** When responding to a Listserv message, you need to decide whether your response is appropriate for everyone on the Listserv or only for the specific person who sent the message.

- *Responding to everyone on the listserv...* If you feel that your response is appropriate for all members to read, click on "Reply" or "Reply All" and send your response. Your message is then sent to everyone on the listserv.
- *Responding only to the sender...* If you want to reply only to the person who sent the message, click on "New" and type that person's email address on the "To" line.

Consider whether your response is intended for the simply originator of the message or EVERY subscriber to the listserv.

## applied

### listserv netiquette

- Be aware that some people receive hundreds of email messages a day. No one wants to receive unnecessary emails. Be sure that any message you post to a listserv is relevant to the list and useful to those who read the list (reply messages like "Great!" are not very useful).
- It is always wise to consider how the person reading the message may perceive the content of your email message. The lack of body language and voice inflection sometimes makes it possible to interpret an email message in many different ways.
- How your words look can be as important as what they say. For example, using ALL CAPS is interpreted as the written equivalent of talking in a loud voice.

### Is the listserv private?

Email sent to a listserv is as secure as any other email. But keep in mind that email sent to a list goes to a larger number of individuals and that any individual member can forward mail from the list to individuals outside of the list. Be aware that while the listserv is exclusive, your writing is never entirely private.

# powerpoint slides

Presentations and trainings create excellent opportunities to promote the work of NIAH. At a minimum, NIAH partners and affiliates are encouraged to include a NIAH logo on their own powerpoint slides. But when possible, presenters can include “ready-made” NIAH slides to highlight the work of the Initiative.

NIAH powerpoint slides are available in three “sizes” to best suit your opportunity.

**NIAH\_1.ppt** Is a single slide offering an overview of NIAH by describing who is involved and what the Initiative does.

Consider using this slide to reference your adolescent health workscope and federal funding.

**NIAH\_4.ppt** A title and three distinct slides make the case for the Initiative by covering Why Adolescence?; What is the National Initiative?; and National Initiative Goals.

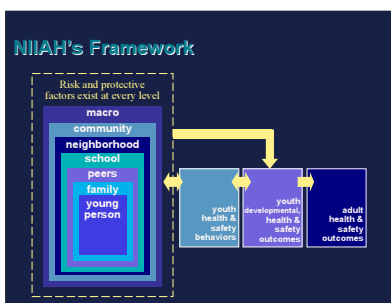
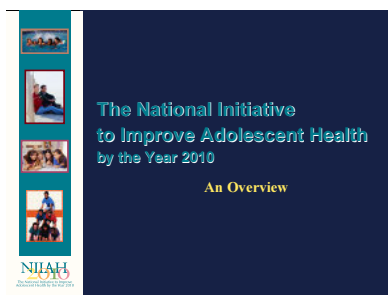
These slides are suited for a brief overview of the Initiative and can be used to frame your work in the context of national objectives for adolescent health.

**NIAH\_8.ppt** A title and seven slides include: Why Adolescence?; What is the National Initiative?; National Initiative Goals; NIAH’s Framework; NIAH Partners and Affiliates — Academic Institutions and National Organizations; and NIAH Resources.

These slides offer a more complete adolescent health story and make an excellent platform for discussing both the National Initiative and frameworks for addressing adolescent health concerns.

*All NIAH slides include notes for use – main ideas are highlighted and segues are suggested.*

NIAH Powerpoint Title Slide



**Talking Points**

- Adolescent health is a complex issue! It is not as simple as “get kids to use condoms.”
- Explain elements left to right.
  - **Risk and protective factors** -- As a way untangling how/why -- look at the factors that influence how much risk a young person experiences or how many supports or protections can moderate the relationship between the risk and the outcome or behavior.
  - **Levels/spheres of influences/systems** -- tendency to focus just on the kid, rather than these other levels -- all have an impact (sometimes called the “ecological model”
    - Macro: *Laws, policies, economy, historical events, race and class issues, media, etc.*

Don't forget to mention:

- HEALTH = SAFETY, TOO.

**Segue**

- Who is part of the initiative?

## applied

### Adapt and amend

Like many of the resources provided in this primer, it is anticipated that the NIAH slide set will rarely be used “as is.”

Rather, the expectation is that NIAH partners and affiliates will pick up bullet points, headings or even entire slides and weave them into existing presentations or trainings.

This holds true for the usage notes provided with the slides. These are not mandatory talking points — they are simply suggestions offered to assist in your thinking.

### Technical notes

When printing this powerpoint, be sure to change the setting from “color” to “black and white” to maximize readability.

The background template has been created on the slide “master.” To make changes you must “view” the “slide master.” Know that changes made on the master will affect the format of all slides.

# logos and other elements

## logos

In 2003, NIAAH created a very simple black and white typographic logo for use in promotional and communications materials. Since that time, the logo has been used in fact sheets, presentations, web sites, publications and event signage. In 2008, a color version of the logo was created.

The logo can be used with or without the text that provides the full name of the Initiative. When using the logo without this text, be sure to refer to the National Initiative by its full name elsewhere.



Avoid placing the logo on a colored or shaded background unless absolutely necessary and attempt to keep 1/4" of clear space on all sides of the logo if possible.

## tagline

In 2008, NIAAH finalized a tagline that can be used to help “frame” our adolescent health work. Partners and affiliates should feel free to use the tagline as a talking point, slide title or headline. There are no restrictions on where you can place the tagline in relation to the logo. Note, however, that using the tagline in conjunction with the NIAAH logo is challenging because so much text is present. Try using the tagline with the logo version that does not include the entire name of the Initiative.

### NIAAH's Tagline:

Invest in Adolescents for a Healthier America

## colors

The colors used in the NIAAH logo create a palette that can be used to create visual consistency when communicating about NIAAH. The color palette includes the following PMS (Pantone Matching System) colors:

-  NIAAH Blue – PMS 3155C @ 100%
-  Yellow – PMS 109C @ 70%
-  Orange – PMS 151C @ 73%
-  Green – PMS 370C @ 70%
-  Pink – PMS 214C @ 48%

Most Microsoft products (Powerpoint, Word, Excel) do not allow you to specify PMS colors. You can, however, use the “pick a fill color” tool and point at the colors in the NIAAH logo to create your own version of the color palette.

## applied

### file types

When you go to find these items on the web, you will notice a variety of different file formats – which should you use?

**.pdf** – “PDF” files can be opened by almost anyone! Sometimes they can be inserted as a graphic image in standard office applications, but it depends the version you are using.

**.jpg** – A “jpeg” file can only be opened by a web browser or some sort of photo software (such as Photoshop), but it can always be inserted easily into office applications. Jpegs look pretty good on the screen and print fairly well. Because jpeg files are fairly small, they are good to use in powerpoint presentations.

**.eps** – An “eps” file can only be opened by graphics software and only occasionally can be inserted as a graphic image in office applications. You should always use an eps file when you are sending a non-photographic image to be printed on a printing press. Eps files usually look bad on the screen, but print very nicely.

**.wmf** – A “wmf” file is the most compatible file for use with office applications. It is small, looks good on screen and prints reasonably well. Strongly recommend using wmf files for powerpoint presentations.

**.tif** – A “tif” file is the preferred format for high quality, high resolution photographic images. Unlike a jpeg, these files can be enormous! Only use a tif for photographic images that will be printed on a printing press.

# event signage

NIAH partners and affiliates are encouraged to include NIAH signage when they are displaying materials at events or conferences. These might include national conferences where formal exhibits are possible or even local events in university or community settings. NIAH visibility within your display can make for an easy conversation starter about national adolescent health efforts and/or your own organization’s federal funding and adolescent health workscope.

The “I’m a NIAH partner” graphic can be used for this purpose in a number of different ways.



- Create “stickers” by printing the graphic on labels. These can then be used on existing display materials, handouts, folders – even people. In the past, NIAH partners have used these stickers to indicate that a visitor has stopped by the booth as part of a conference-wide raffle that required them to visit all exhibitors. A word-formatted version is available for download.
- Create namebadges by printing the graphic and using with plastic hang-tags. These can be worn by attendees or exhibitors.
- Print the graphic at a large size (8.5 x 11) and use as a small sign. You can attach the color graphic to existing exhibit materials, display in a plastic stand or with cardboard backing. For best results, laminate the small sign.

Complete NIAH display materials have been created for the annual Association of Maternal and Child Health Professionals Conference. The materials featured here focus on resources from SAHRC, NAHIC, and LEAH which limit their general use. However, these materials are available as digital assets for partners and affiliates to adapt and revise as needed.



<p><i>The National Initiative to Improve Adolescent Health by the Year 2010</i></p>	<p><b>data &amp; policy briefs</b> <small>National Adolescent Health Information Center</small></p>
<p>NIAH 2010 provides <b>adolescent health resources</b> and <b>support</b> so you can make adolescents a <b>priority</b> in your <b>MCH</b> program</p>	<p><b>personal assistance</b> <small>SAHRC</small> State Adolescent Health Resource Center</p> <p><b>university experts</b> <small>LEAH</small> The MCH Leadership Education in Adolescent Health Program</p> <p><b>resource newsletter</b> <small>e-adolescence</small></p> <p><b>community guide</b></p>

# additional materials

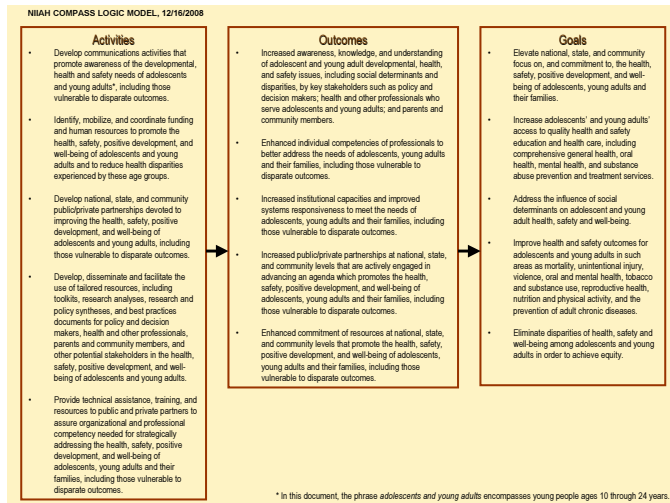
The following NIAH materials are available in multiple digital formats to simplify and streamline their use. PDF files are ideal for printing already formatted information (NIAH Fact Sheet). Word documents can be used to cut and paste content into new materials you intend to develop.

- 21 Critical Objectives (text in word document; pdf)
- NIAH partner/affiliate list (text in word document; pdf)
- NIAH partner/affiliate contact list (text in word document)
- NIAH partner resource catalog (text in word document)
- NIAH operations guide (text in word document)
- NIAH logic model (text in powerpoint slide)
- NIAH framework (text in word document)

*Graphic version of the 21 Critical Health Objectives*

## The 21 Critical Health Objectives for Adolescents & Young Adults

*The NIAH Logic Model*



### Mortality

- Reduce deaths

### Unintentional Injury

- Reduce deaths caused by motor vehicle crashes
- Reduce deaths and injuries caused by alcohol- and drug-related motor vehicle crashes
- Increase use of safety belts
- Reduce the proportion who report that they rode with a driver who had been drinking alcohol

### Violence

- Reduce homicides
- Reduce physical fighting among adolescents
- Reduce weapon carrying on school property

### Mental Health & Substance Abuse

- Reduce the suicide rate
- Reduce the rate of suicide attempts that require medical attention
- Reduce the proportion of those with disabilities who are reported to be sad, unhappy, or depressed
- Increase the proportion of those with mental health problems who receive treatment
- Reduce the proportion engaging in binge drinking of alcoholic beverages
- Reduce past-month use of illicit substances (marijuana)

### Reproductive Health

- Reduce pregnancies
- Reduce the number of new HIV diagnoses
- Reduce the proportion with Chlamydia trachomatis infections
- Increase the proportion who abstain from sexual intercourse or use condoms if sexually active

### Prevention of Chronic Diseases

- Reduce tobacco use
- Reduce the proportion who are overweight or obese
- Increase the proportion who engage in vigorous physical activity that promotes cardiorespiratory fitness 3 or more days per week for 20 or more minutes per occasion

## acronym soup

AAP: American Academy of Pediatrics

ABA: American Bar Association

AMCHP: Association of Maternal & Child Health Programs

ASTHO: Association of State and Territorial Health Officials

CARTA: Center for Applied Research and Technical Assistance

CDC/DASH: The Centers for Disease Control and Prevention (CDC) / Division of Adolescent and School Health (DASH)

CityMatCH: National membership organization of city and county health departments' maternal and child health (MCH) programs and leaders representing urban communities in the United States

CSAP: SAMHSA's Center for Substance Abuse Prevention

CSN: Children's Safety Network

HRSA: Health Resources and Services Administration

HTN: Healthy Teen Network

LEAH: MCHB's Leadership Education in Adolescent Health Program

MCHB: Maternal and Child Health Bureau

NACCHO: National Association of County and City Health Officials

NAHIC: National Adolescent Health Information Center

NCSL: National Conference of State Legislatures

NIH: The National Institutes of Health

NIHCM: National Institute for Health Care Management Foundation

NIAH: National Initiative to Improve Adolescent Health by the Year 2010

NNSAHCN: National Network of State Adolescent Health Coordinators

OJJDP: Office of Juvenile Justice and Delinquency Prevention, Department of Justice

PIPPAH: Partners in Program Planning for Adolescent Health Initiative

SAHRC: State Adolescent Health Resource Center

SAM: Society for Adolescent Medicine

SAMHSA: Substance Abuse and Mental Health Services Administration

## faq

### **Do I need permission or approval to use these materials?**

No. NIAH partners and affiliates are free to use these materials with no restrictions.

### **Who do I call with questions about these materials?**

Contact Glynis Shea, team leader for the Communications Workgroup at 612-624-3772 or sheax011@umn.edu

### **Do I need to report back when I do use the materials?**

It is very useful when NIAH partners and affiliates are aware of one another's activities and materials. While usage reporting is not required, it is recommended. Simply send a copy of any materials that reference adolescent/young adult or NIAH to sheax011@umn.edu.

### **I want to incorporate these materials into my own work. What citation should I use?**

There is no need to use a citation for these NIAH-related materials. Please do take the opportunity to reference NIAH by using an attribution statement of some sort. Original materials developed by NIAH partners and affiliates, however, should be treated as any other piece of intellectual property and cited accordingly.

### **I met with an organization that would be a great NIAH partner/affiliate.**

#### **Now what do I do?**

Contact either Partnership Workgroup Chair:

Shelli Doll at 517-324-7392 or sdoll@mphi.org

Maureen Fitzgerald at 402-561-7514 or mfitzger@unmc.edu

#### **How do I join a NIAH workgroup?**

Contact Trina Anglin, HRSA/MCHB-OAH at 301-443-4291 or Tanglin@hrsa.gov

### **I really improved one of the NIAH products and think everybody should see it. Who do I tell?**

Contact Glynis Shea, team leader for the Communications Workgroup at 612-624-3772 or sheax011@umn.edu or Trina Anglin, HRSA/MCHB-OAH at 301-443-4291 or Tanglin@hrsa.gov