



Worcester: Impacting Sexual Health (WISH) Task Force

WISH Membership Form

Background

WISH Goals

WISH is a community task force with the goal to improve educational, economic and social outcomes for Worcester youth by making a positive impact on adolescent sexual health and creating an environment that supports healthy relationships. WISH aims to accomplish this goal by engaging the Worcester community to raise the urgency for addressing the city's poor sexual health indicators (higher rates of teen birth and sexually-transmitted infections than the state average) and increasing access to medically accurate, age-appropriate, comprehensive sexuality education.

WISH Activities

Between 2015 and 2018, the WISH Task Force will: 1) engage, convene and educate community leaders, organizations, parents, youth, youth-serving professionals, faith leaders, policy-makers and others in Worcester to improve sexual health outcomes for youth; 2) implement a public awareness campaign to engage decision-makers, articulate the issue and why it matters to Worcester, and generate support toward action; and 3) gather data about teen sexual health in the city of Worcester that can be used to support action.

WISH Task Force Structure

Task Force members include organizations, youth-serving professionals, community leaders, parents, young people, faith leaders, policymakers and others who care about increasing opportunities for and improving the future of Worcester youth.

WISH Co-Chairs: Leo Negrón Cruz, Edward M. Kennedy Community Health Center; and Jen Slonaker, Planned Parenthood League of Massachusetts.

WISH Staff: Jena B. Adams, Center for Health Impact (formerly known as Central MA AHEC). Contact Jena by email at: jenabadams@centerforhealthimpact.org or by phone at 508-756-6676 x 20.

WISH Task Force

WISH Task Force members may participate as individuals or as representatives of WISH Member Organizations who report back to their staff and board (as appropriate) about WISH activities. Task Force members provide input and networking at quarterly full Task Force meetings; supporting or engaging in WISH-related activities; participating in subcommittee work; and by supporting and raising awareness about WISH goals in Worcester.

WISH Steering Committee

Steering is the governing body for WISH and meets monthly. Members represent Worcester organizations and/or contribute WISH-specific expertise and experience. Members agree to report back to their staff and board (as appropriate) about WISH activities to maintain their organization's connection to WISH.

WISH Subcommittees

Three sub-committees meet monthly to develop and make recommendations about WISH capacity-building and educational activities; public awareness activities; and data-related activities.

WISH Membership Form

<p>Type of WISH Member (Please check one type of membership):</p> <p><input type="checkbox"/> Individual Member (Please print name): _____</p> <p><input type="checkbox"/> Organization Member (Please print the name of the organization below): _____</p>	
<p>For Organization Members only:</p> <p>Please print the name of persons who will participate in WISH: _____</p> <p>Please indicate consent for the organization name to be listed as a WISH member on WISH website and materials. <i>Note: organizations may choose to provide or retract this permission at any time; any other use of the organization name or WISH name or logo by either party must be agreed upon in advance on a case-by-case basis.</i></p> <p><input type="checkbox"/> Yes, the organization name may be used <input type="checkbox"/> No, the organization name may not be used</p>	
<p>Signature below indicates that the Member agrees to:</p> <ul style="list-style-type: none"> ➤ Endorse WISH goals to improve educational, economic and social outcomes for Worcester youth; positively impact adolescent sexual health; and create an environment that supports healthy relationships and ➤ Participate in WISH meetings and report back to the organization (as appropriate). <i>Organizations are asked to replace WISH representative who are unable to participate.</i> 	
<p>Printed name of signer (Name of Individual Member or person authorized to sign for Organization Membership)</p>	
Signature	Signer's email and phone number

Please indicate your WISH-related activities or interests below:	Already doing this	Can start doing this	Would like info about how
Provide technical assistance or training related to WISH activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offer sexual health education for Worcester youth (ages _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offer training for Worcester parents about youth sexual health needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Host or send staff for training about how to support youth sexual health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Include a link to the WISH website on my/our website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Create organizational policy in support of healthy adolescent sexuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disseminate WISH materials and information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support the development of data collection instruments and protocols	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participate in WISH-related data collection (e.g., surveys, focus groups)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Share WISH-related data with WISH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assist WISH subcommittee (capacity-building, public awareness, data)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please describe):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please return this form by email jenabadams@centerforhealthimpact.org; Fax 508-756-9825; or mail to Jena Adams, Center for Health Impact, 35 Harvard St., Ste. 300, Worcester, MA 01609