On Sunday, May 5, 2019, AAWH Steering Committee members convened in a closed-door meeting hosted by AMAG Pharmaceuticals to discuss two key activities: 1) consider issuing a Call to Action as a strategic approach to raise awareness and spur action to overcome barriers to sexual health identified in the consensus paper and 2) affirm the strategic plan for the AAWH Patient-Clinician Discussion Resource. Additionally, members were briefed on ongoing recruitment efforts. Throughout the meeting, members were focused on identifying executable goals and actions they and their organizations could take to help change the conversation around women’s sexual health. 

For a full list of participating individuals, please see the appendix.

The meeting objectives were to:
• Discuss, refine and finalize Women’s Sexual Health Call to Action concept as a strategy to raise awareness of barriers to conversations about sexual health and identify actions to overcome them
  • Finalize and prioritize action steps
  • Identify AAWH partners and external organizations to engage
  • Determine next steps to bring to fruition
• Affirm the strategic and tactical plan to develop and disseminate the patient-clinician discussion resource
  • Review proposed structure and refine proposed content
  • Map out a dissemination plan that ties into the Call to Action, including specific roles for AAWH partner organizations
• Discuss ongoing recruitment activities, criteria for membership, and potential targets
• Review and align on next steps

Where We Are Now: Discussion of Progress to Date and Upcoming Milestones

The meeting began with a brief review of accomplishments so far, with a focus on progress since the most recent Steering Committee meeting in October 2019, including:
• The publication of the consensus paper by the Journal of Women’s Health on February 4, 2019
• The progress made by the Patient-Clinician Discussion Resource working groups
• The recruitment of the first AAWH at-large member

Members reviewed the activity surrounding the paper’s publication, provided feedback on the utility of the partner toolkit that was developed to support publication announcements, and suggested additional opportunities to raise awareness of the paper’s key messages. The group appreciated the
turnkey social assets, and they agreed that slides with key takeaways from the consensus paper and talking points would be helpful, as would a mini overview for consumers with links to more information (“Five Things You Need to Know”). AMAG and Reservoir Communications Group will develop and design slides, draft talking points, and create a mini overview that can be used on social media or partner websites/newsletters to further leverage the consensus paper.

Women’s Sexual Health: A Call to Action

Reservoir Communications Group and the Steering Committee Co-Chairs briefed the committee on a proposed strategy – a Call to Action – to generate a sense of urgency around the barriers to conversations about women’s sexual health that were identified in the consensus paper. With the current cultural focus on women’s empowerment, the time is ripe to raise awareness about the resources and programs that exist to support conversations about women’s sexual health, and ultimately to get clinicians and women to use those resources to start a dialogue. The Call to Action would create a rallying cry that other organizations and experts could sign onto, and it would offer them concrete actions they can take to help foster more open and informed discussions about women’s sexual health.

The Steering Committee members discussed the proposed framework for the Call to Action, including the three focus areas (clinical education, clinician understanding, and patient education), the vision statements proposed for each, and the role AAWH would play to drive change through partner commitments and communications.

Participants agreed that a mini-campaign (with a tagline such as “Just Ask”) around a validated screening tool like the Brief Sexual Symptom Checklist for Women (BSSC-W), the decreased sexual desire screener (DSDS), or the PROMIS sexual function and satisfaction measures (for use in patients with cancer) made sense as a concrete, action-oriented starting point. There was a robust discussion about the best strategies for maximizing buy-in, preventing pushback, capturing the attention of the target audiences, and making sure this issue is a priority for clinicians and women. The following ideas received broad support from the group:

- Calling for action that is concrete and measurable
- Using data to inform the call to action, such as starting with a survey of women to highlight the prevalence of sexual health concerns and exploring options to replicate and expand upon the PRESIDE survey, with updated numbers (published in 2008, PRESIDE mailed surveys to >50,000 households in 2006, making the information a little dated; moreover, this was prior to the Decreased Sexual Desire Screener (DSDS) being introduced).
- Leveraging patient stories to increase understanding and normalize the discussion
- Including an advocacy component and engaging other women’s advocacy groups
- Articulating and emphasizing the “why” behind the Call to Action: sexual health is a human right and vital to quality of life
Steering Committee members also suggested several specific tactics that could be incorporated into the Call to Action as commitments that could be made by partner organizations who sign on to participate in the Call to Action, including:

- Engaging ACOG to update its Practice Bulletin on Female Sexual Dysfunction to include the DSDS and recognize FDA-approved treatments for HSDD
- Work with healthcare professional schools and organizations like the Association of Professors of Gynecology and Obstetrics (APGO) to encourage schools to prioritize sexual health training and adopt model curricula for instruction, such as that used by the University of Minnesota Medical School
- Approaching women’s advocacy organizations such as Hadassah, National Women’s Law Center, National Partnership for Women and Families, Black Mamas Matter Alliance, and Planned Parenthood to include sexual health as an advocacy priority and commit to promoting the discussion resource
- Identifying a spokesperson or working to engage social media influencers (e.g. @somedocs) to broaden our reach
- Reaching out to medical societies including the American Academy of Family Physicians (AAFP), the American Medical Association (AMA), and the American College of Physicians (ACP) to discuss what role they could play as part of the Call to Action

AMAG and Reservoir Communications Group will revise the Call to Action concept brief to reflect the Steering Committee’s input and develop a plan for activation based on available resources. Individual follow-up calls will be scheduled with each Steering Committee member to solicit additional feedback, determine the role each organization can play, and ensure broad support for the approach and plan.

**Patient-Clinician Discussion Resource**

Steering Committee members next turned their attention to the Patient-Clinician Discussion Resource. They reviewed and affirmed the overarching strategy statement, goals, target audiences and key considerations that were developed through the working group calls earlier in the year. They considered The Conversation Project as an example of a digital hub where patients and clinicians could access resources, and expressed support for building a similar microsite for the AAWH Discussion Resource. Next, Steering Committee members reviewed proposed content for the patient and clinician modules within the Discussion Resource and discussed plans to promote and disseminate it. Members proposed the following tactical and promotional ideas:

- Creating resources that can be co-branded by individual member organizations
- Reaching out to influencers and women’s organizations to highlight the Discussion Resource and push it out to their audiences
- Recording and/or pitching podcasts about the issue that direct listeners to the Discussion Resource (e.g. pitch “In the Ladies' Room with Dr. Donnica”)
• Creating discussion guides for facilitated conversations at women’s and professional conferences

Reservoir Communications Group will build out a complete map of the Discussion Resource based on available resources and create a detailed plan for its development and dissemination for members to review and approve. Steering Committee members will have the opportunity to review and test the Discussion Resource prior to the soft launch/pilot phase later this year.

Next Steps

Alliance staff will take on the following near- and immediate-term next steps to refine and finalize the Call to Action, develop the Patient-Clinician Discussion Resource, and expand the Alliance’s membership:

1. Circulate a list of Steering Committee members with contact information
2. Create a toolkit of slides, talking points, and consumer-facing mini-overviews of the consensus paper
3. Reframe the Call to Action concept document and develop a proposed plan for a mini-campaign around screening for sexual health concerns; schedule follow-up calls with all Steering Committee members to discuss
4. Create a full content map of the Patient-Clinician Discussion Resource and a detailed plan for development and dissemination

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Appendix: Participants

- American Medical Women’s Association (AMWA) – Roberta Gebhard, DO, President
- American Sexual Health Association (ASHA) – Deborah Arrindell, Vice President of Health Policy
- HealthyWomen – Beth Battaglino, CEO
- IntimMedicine Specialists – Jim Simon, MD, CCD, NCMP, IF, FACOG
- Jewish Women International (JWI) – Lori Weinstein, President & CEO
- National Association of Nurse Practitioners in Women’s Health (NPWH) – Gay Johnson, CEO
- National Black Nurses Association (NBNA) – Betty Braxter, PhD, CNM, TTS, Co-Chair, Women’s Health Committee
- National Consumers League (NCL) – Sally Greenberg, President & CEO
- North American Menopause Society (NAMS) –
  - Sheryl Kingsberg, PhD, Past President
  - JoAnne Pinkerton, MD, Executive Director
- Physician Assistant Foundation (PAF) – Leticia Bland, PA-C, Trustee
- Society of Gynecologic Surgeons (SGS) – Nancy Frankel, PhD, Executive Director
- AMAG Pharmaceuticals
  - Julie Krop, MD (Medical Affairs)
  - Amama Sadiq, MD, MPH (Medical Affairs)
  - Jennifer Gudeman, PharmD (Medical Affairs)
  - Rushmie Nofsinger (Corporate Affairs)
  - Sarah Connors (Corporate Affairs)
- Reservoir Communications Group (meeting facilitation and support)
  - Lee Lynch
  - Susan Awad