

**Minutes of
DoD Sexually Transmitted Diseases Prevention Committee (STDPC)
Meeting of 27 July 00**

Attending

CDR Josephine Brumit
Vickie Brannan, USCG
Bill Calvert, NEHC, Chairman
Joel Gaydos, MD, WRAIR
Steve Heaston, NEHC
CDR Sharon Ludwig, USPHS/USCG
CDR Brian Murphy, NEHC Preventive Medicine
LTC David D. Peterson, USACHPPM

Attending by Phone

Bob MacDonald, NEHC

Guests

Col. Dana Bradshaw, MD, MPH, FAAFP, USAF, MC, Chief, Preventive Medicine, Office of the Surgeon General, Air Force Medical Operations Agency & Chair Joint Preventive Medicine Policy Group (JPMPG)
CAPT Robert Murphy, MC, USN, Executive Assistant to General Carlton & Co-Chair, Alcohol Abuse, Tobacco Use Reduction Committee
Lynn Pahland, Health Affairs

Facilitator

CDR (sel) Edie Dozsa, Navy Medicine Center for Organizational Development

1. Bill Calvert convened the meeting at 0915 at the Walter Reed Army Medical Center, 7100 Georgia Ave. N.W., Washington, DC, Building Number 1 in the Preventive Medicine Class room on the third floor.
2. The **minutes of the 22 June 00 were reviewed, corrected and approved.** A copy of the corrected minutes will be posted on the STDPC Home Page and sent to all members.
3. Bill Calvert introduced CAPT Murphy who provided the STDPC with a keynote address. A copy of the presentation will be sent to all members through e-mail. Noteworthy points of CAPT Murphy's presentation and remarks were:
 - The work of the STDPC is essential.
 - General Carlton has signed letters of appointment for committee chairs and members of the STDPC. These letters are being sent through the individual's chain of command for endorsement.
 - We need to report to PSHPC. If we have problems with our plan such as not being able to complete a section due to lack of participation, this would be

reported to the Flag level person in that area, who has the ability to ensure full participation of members.

4. Lynn Pahland, Health Affairs, presented the second keynote address. Ms. Pahland spoke to the PSHPC and answered questions. Notables were:
 - PSHPC is a high level council whose success relies on the diversity of its representation. This involves all aspects of military services and does not place the responsibility on just one area such as medical.
 - Its purpose is to create an environment conducive for the individual to make healthy choices. Thus we must focus on cultural change.
 - There is a lot of high level interest in the STDPC and our work.
 - Identify best practices wherever they are. Allow each service to implement these practices to best fit their structure. We should look for a uniform approach to common problems, but this is not an attempt to make the services “purple”.
 - Other countries are looking at the U.S. Military for clinical care, policy and even prevention approaches. The Office of AIDS Policy at the White House is looking at some HIV and Military issues.
 - Question: As the DoD developed HIV programs, we saw a decline in STD efforts. There is a need to quickly look at STDs to establish rates. How do we (STDPC) prioritize issues in our Action Plan.
 - Answer:
 - We need to establish STD rates in conjunction with HIV programs.
 - The PSHPC can prioritize issues on the STDPC Action Plan. The PSHPC prioritizes issues based on:
 - Valid statistics that there is a problem.
 - Information is provided that allows them to act.
 - Issue has an impact on readiness, individual and population health.
 - Identification on how we can help support recruitment, retention and have a safe military community, i.e., quantifying outcome measures.
5. CDR (sel) Edie Dozsa introduced the remainder of the STDPC meeting for strategic planning. With a overview of facilitation and our task to address the Action, CDR (sel) Dozsa reviewed “Ground Rules” for the meeting.
6. Bill Calvert provided an explanation of the new document for the STDPC Action Plan. The purpose of placing the Action Plan into this model, was to be clearer with the intent of the Action Plan. This document is a working document derived from the Action Plan, wherein the STDPC could “fill in the details” on how we anticipate implementing the Action Plan. It is organized like a strategic planning document, allowing assignment of responsibilities, and providing a progress report section. In short, many of the “Requirements” of the STDPC Action Plan, are now list as “Goals” and there are objects of each goal, as well as strategies to meet each objective
7. Surveillance
CDR Ludwig, Chair of this Subcommittee, will assume responsibility for the 3 goal areas. The Subcommittee will use this template to guide their course of action.

They will add items as necessary and develop a Gantt Chart for Action Items. Col. Dana Bradshaw, as Chair of the JPMPG, will work with the Subcommittee in order to coordinate our efforts with this Committee. Additional members of this Subcommittee are: Col. Kelly McKee, Dr. Joel Gaydos, CDR Brian Murphy (NEHC Preventive Medicine), Dr. Phil Renzullo, Lt.Col. McIntosh (a new Air Force person not available yet), et al. Questions regarding this Subcommittee can be addressed to CDR Ludwig or Bill Calvert.

8. Health Promotion Education

Steve Heaston, Chair of this Subcommittee, will coordinate the efforts of the Subcommittee. Members of the Subcommittee will be tasked to coordinate the five goals of the Action Plan, with other members (core and Ad Hoc) assisting as appropriate. The STDPC identified that personnel would be needed from the following areas to address Health Promotion Education goals:

CORE

- Line Education/Training (CNET, or other Service training agency) (1) (Barry Hoag)
- Women's Health representative (1) (CDR Brumit)
- Preventive Medicine representative (1 each Army (LTC David Peterson), USAF-(TBA))
- Health Promotion (Army (LTC David Peterson), Navy (Steve Heaston), Air Force (LTC Steven Viera), Marine Corps (Catherine Ficadenti), Coast Guard (Ms. Vickie Brannon), VA, (Dr. Kim Hamlett))
- PPIP (one representative from PPIP Committee TBA)
- NHRC (CDR Rick Shaffer)/HMJF(Donna Ruscavage)

AD HOC

- Chaplain/Ethicist
- MWR
- Exchange representatives
- Social worker
- Family Service Centers
- Legal
- Subject Matter Experts

Steve will contact those on the subcommittee for further developments.

9. The intent here is to divide the STDPC Action Plan into manageable chunks in order to coordinate action and spread the workload. There is no intent to exclude anyone from any Subcommittee. If anyone believes there to be an oversight, please let Bill Calvert know. Where there is no identified person for a given area, Mr. Calvert will work to obtain a representative utilizing the support from General Carlton's office. Ad Hoc participation will be determined as needed by Subcommittee Chairs with STDPC Chairman's assistance.

10. Subcommittee recommendations and final actions will be reported and approved by the STDPC. If the STDPC completes their course of action for the remainder of the plan, the STDPC can consider meeting every other month and allow the Subcommittees to work as they deem appropriate to sustain participation and productivity.

11. The **August 24, 2000, STDPC meeting does not have a host. Bill Calvert will e-mail members to see who would be willing to host the meeting.** Details, such as meeting room, directions, will be shared through e-mail communication.

12. The **STDPC set the September STDPC meet in Washington on either September 21st or 12th.** Bill Calvert will poll the STDPC members by e-mail to select the date which most members can attend.

13. The meeting adjourned at 1530.

Minutes taken by: Bill Calvert, Chairman, STDPC