



# ARIZONA RURAL WOMEN'S HEALTH NETWORK

## 2016

### BUSINESS PLAN

---

## 1. NETWORK DESCRIPTION

### Mission

The Arizona Rural Women's Health Network's mission is to build our partners' capacity to cultivate and promote innovative policies, practices, and services that improve the health of women in rural Arizona.

### Values

- Maximize women's participation and empowerment.
- Focus on women-specific health and wellness concerns that emphasize the promotion of health and wellness and preventive strategies throughout the life-span.
- Promote programs and services that emphasize positive relationships among women and that provide opportunities for social support and interaction.
- Recognize that rural women share many common strengths and challenges, while also coming from diverse contexts and backgrounds that need to be understood and respected in programs and services for rural women.
- Promote exchange of information and resources to rural women regarding the health and wellness of rural women and their families.
- Respect that women want choices in health and wellness services and need to be enabled to exercise these.
- Trust, respect and confidentiality are of utmost importance to rural women seeking health and wellness services and social support.
- Recognize that programs and services that build on women's strengths provide outlets for women's creativity and offer multi-generational support services are highly valued.

### Vision

Women in rural Arizona will experience optimal health and wellness.

### History and Culture

The Arizona Rural Women's Health Network (AzRWHN or the Network) began in 2006 as a group of influential leaders across the state concerned about the health disparities that rural Arizona women experience. The Arizona Rural Women's Health Initiative Council (Council), was formally organized to address the lack of health care information, services, and education provided or developed for rural healthcare providers and the women they serve. In 2008, the Council and its fiscal agent at the time,

the Eastern Area Health Education Center (EAHEC), applied for and received funding for a one-year Health Resources and Services Administration (HRSA) Planning Grant which led to the Council expanding and being renamed Arizona Rural Women's Health Network (AzRWHN or Network). In 2011, in collaboration with EAHEC, and 2014, in collaboration with Canyonlands Healthcare, the Network was awarded a three-year HRSA Network Development Grant.

The Network strives to improve the health of all women living in rural areas of Arizona. Since 2006, various health promotion, training and education events have been held throughout rural areas. In the fall of 2012, the Network conducted a comprehensive needs assessment in order to identify a critical and pressing rural health topic. The assessment revealed services, resources and education related to sexual violence in rural areas were of tremendous need in rural Arizona. In 2014 Canyonlands Healthcare became the fiscal agent and applied for and received the HRSA Rural Health Network Development Grant with an emphasis on addressing sexual violence in rural Arizona. AzRWHN is using this funding to support collaboration so health care providers can adequately address sexual violence as part of a comprehensive approach to women's health. The Network aims to bridge the gaps by providing training and support to health workers specific to the needs of rural Arizona women.

AzRWHN started as a collaborative effort from providers and public health advocates who wanted to improve women's health by supporting the communities who provide these services. As the momentum and membership grew so did the resources; therefore, paid staff were essential to further the Network's efforts. The two paid Network staff regularly seek input from rural communities so they can improve the opportunities and resources for growth. Throughout this progress the shared vision and team work has remained constant. Staff and members are motivated to work together with state and local stakeholders to provide education and training for rural communities, which improves women's health.

#### Strategic Objectives

In 2015 the staff and membership of the Network participated in a full day strategic planning process—using an outside facilitator and creating a Strengths-Weakness-Opportunity-Threat (SWOT) analysis. Staff and members spent time reviewing the objectives to make sure they support the mission and vision as well as being achievable and fit with the goal they are associated with. Over a period of two months AzRWHN created a fully revised strategic plan.

### **Goal 1: Strengthen the Capacity of the AZRWHN to Improve Health Information and Services for Women in Rural Arizona**

#### **1. Diversify network membership through recruitment and retention of at least 15 new members.**

- Further develop and maintain collaborative relationships with local organizations focusing on issues related to sexual violence
- Increase participation in local coordinated community response efforts
- Share network membership recruitment materials with public health experts, law enforcement personnel, legal representatives and medical experts

**2. Provide professional development to rural healthcare providers and community organizations.**

- Collaborate with community faith-based organizations to reach out to religious communities
- Provide ongoing trainings with AHECs, rural health centers and hospital clinical staff related to sexual violence
- Identify additional community partners with education and training needs.
- Facilitate exchange of innovative resources and best practices around sexual violence through

**3. Identify and educate others on gaps in access to sexual violence services in rural Arizona**

- Provide sexual violence training to rural service providers and community members in at least 5 community forums
- Collaborate with Northern Arizona Center Against Sexual Assault (NACASA), Southern Arizona Center Against Sexual Assault (SACASA), and Arizona Coalition to End Sexual and Domestic Violence (ACESDV) to develop consistent means of collecting de-identified data related to rural sexual violence and services

**4. Support and sustain the Arizona Rural Women's Health Network.**

- Coordinate Quarterly Meetings
- Coordinate monthly Leadership Team Meetings
- Develop a business model
- Look for additional funders
- Develop a sustainability plan
- Develop and implement member/partner satisfaction survey to identify areas for program improvement and enhancement

**Goal 2: Increase Access to and Coordination of Sexual Violence Services for Women in Rural Arizona**

**1. Increase the number of Sexual Assault Nurse Examiner (SANE)-Registered Nurses (RN) in rural Arizona.**

- Coordinate with the Governor's Office for Children, Faith and Families to co-fund and sponsor first round of training for 2 SANE RNs
- Conduct outreach to rural sites to identify additional RN candidates for SANE training program scholarships
- Develop and implement SANE RN evaluation survey to assess impact of trainings and identify additional needs

**2. Enhance working relationships, provide professional development and share best practices related to coordinated response to sexual violence.**

- Identify sexual violence training and professional development needs of network members and partners
- Coordinate quarterly meetings to meet professional development needs, which may include training, speakers and technical assistance

- Conduct ongoing internal assessment of rural health provider organizations and forensic exam sites to determine staff training needs
- Identify academic institutions to assist in development and promotion of rural provider trainings on the Affordable Care Act (ACA), sexual violence, and trauma informed care
- Identify trainers and develop workshop contents to ensure compliance with language in the ACA
- Identify and coordinate rural provider training sites
- Deliver at least 10 trainings to rural health care professionals around sexual violence and trauma informed care

### **3. Promote and deliver Community Health Worker (CHW) curriculum and training course.**

- Promote and continue to deliver the *Sexual Violence Curriculum for Community Health Workers and Promotoras* and training around the state, tailored to Hispanic and Native American populations, and offer nationally
- Utilize a technical advisor to incorporate CHW curriculum and training as a revenue and sustainability tool for AzRWHN
- Conduct evaluation with training participants to continually improve CHW curriculum and training

### **4. Provide technical assistance to at least 2 rural organizations wishing to establish forensic exam sites.**

- Provide technical assistance and/or SANE-RN placement assistance to rural forensic exam sites interested in revitalizing programs
- Provide supplies, equipment and support for creating an exam site in rural area that do have exams available

### **5. Pilot at least one pediatric/adult dual use rural forensic exam site.**

- Identify rural partner with an established forensic exam site and Coordinated Community Response Teams (CCRT) to participate in pilot test of a pediatric/adult dual use forensic exam site
- Establish work plan in coordination with pilot site to comply with national best practices
- Evaluate success and sustainability of pilot program

## **Goal 3: Positively Impact Rural Women's Health through Advocacy and Policy Change**

### **1. Increase awareness of rural women's health issues through multimedia.**

- Utilize AzRWHN's social media to inform rural Arizona and advance policy change on rural women's health issues
- Produce at least 3 digital stories to advocate for and raise awareness of rural women's health issues

### **2. Create sub-committees.**

- Create women's rural health advocacy sub-committee with Network members
- Convene sub-committees quarterly in face-to-face meetings, with monthly conference calls and e-mails as needed for action items
- Identify 3 rural women's health champions and present awards at annual symposium in May 2016

### Business Structure and Governance

AzRWHN is a project housed at the state primary care association (PCA), the Arizona Alliance for Community Health Centers, funded by Canyonlands Healthcare from Page, AZ. There are 17 member organizations that follow the agreed upon AzRWHN Operating Procedures for the Network structure. The structure includes an oversight body, called the Leadership Team, which is voted on annually by the members. The full Network membership meets quarterly in person and the Leadership Team holds monthly calls. AzRWHN also has committees, which are staff driven and include members who volunteer to participate on the committee.

There are two full-time paid staff members—the Director and the Coordinator—who carry out the majority of the strategic plan and operations. The AzRWHN Director is administratively supervised by the Director of Health Center Development at the Arizona Alliance for Community Health Centers (AACHC), and fiscally by the Chief Executive Officer from Canyonlands Healthcare. The AzRWHN Coordinator is supervised by the AzRWHN Director.

## 2. MARKET ANALYSIS AND PLAN

### Rural Health Care Environment

AzRWHN membership is comprised of leaders statewide whose expertise can be harnessed as a collective power to address, assess, coordinate, and respond to the multiple and diverse issues shaping rural women's healthcare in Arizona. Every state has a rural office which provides support and training to rural communities, and the Network works in collaboration with this office (Arizona Center for Rural Health at the University of Arizona) to address women's health issues and support the community.

Arizona has 15 counties and covers 113,594 square miles, with only 56.3 people per square mile—well below the 87.4 national average. Seven of these counties are considered 100% rural with many rural areas in the remaining counties. Arizona also has a very high Latino (30.5%) and American Indian population (5.3%). There are 22 federally recognized tribes and Arizona houses the two largest tribes in the United States, Navajo and Tohono O'odham. With so many rural areas, and women making up 50.3% of the population, it was important to the AzRWHN founders to support the health and wellbeing of these communities. In such a large state by land mass, so many of the resources and support are geared toward the urban centers and not evenly distributed throughout the state. The Network aims to balance this out by prioritizing rural communities and focusing on women's health issues.

During the 2015 Strategic Plan process AzRWHN members reviewed and revised the existing strategic plan. As part of this process they participated in a SWOT analysis (Strengths, Weakness, Opportunities and Threats). The following are the top three items identified for each section:

### Strengths

- Strong director and coordinator—now have two staff (quality and quantity)
- Good partnering and collaboration—reduces reinventing the wheel
- Staff has connections and experience in the communities

### Weaknesses

- Current member engagement—the same members continue to come to the table
- Lack of brand recognition
- Lack of education for health care providers and understanding of women’s health in rural communities

### Opportunities

- Develop business model and sustainability plan
- There is a workforce development effort for community health workers to help reach more women (underserved and minorities) and increase prevention strategies
- Expand targeted outreach to potential members

### Threats

- Only 1 funder; only 3-year grant
- Keeping current members engaged and galvanized
- Unfriendly environment for undocumented individuals results in a decrease of services (i.e. some hospitals will not transport unless patients can pay)

### Rural Health Network Members and Customers

AzRWHN has a membership application process, which requires the applicant organization to complete a list of questions for consideration. Each application is reviewed and voted on at quarterly meetings, as per our Operating Procedures, by the membership. The membership roles are detailed in the membership application and in the Operating Procedures. For additional information see the attached *AzRWHN Operating Procedures* document. To date the following partners and organizations are members of the Network:

- Rural Community Health Centers (CHC or FQHC)
- Health Education Centers
- The Primary Care Association
- The Arizona Department of Health Services
- The Arizona Center for Rural Health
- Universities and higher education institutions
- Non-profit providers
- Programs addressing health disparities in rural areas

### Member and Customer Needs Assessment

During a March 30, 2016 meeting, facilitated by the Rural Health Innovations, the Network members used the *Business Canvas Worksheet* to brainstorm and detail a list of members and customers’ needs. The following is what was created from this process:

## Jobs

Individual network members work to be done, problems to solve, needs to satisfy, tasks to complete.

- Provider training and education
  - train clinical providers quality family planning
  - training and education
  - resource development and assessment
- Recruitment and retention of providers
  - recruit and retain qualified providers
  - quality student / resident sites
- Access to care
  - physical health (clinical services) from primary care to emergency department
  - decrease barriers to family planning services
  - increasing access to care
- Improve women's health
  - prevention, education and tools to support (e.g., gym, safe activity areas, access to fresh food, etc.)
  - well women care services
  - funding to promote preconception health
- Teen wellness
  - prevent teen pregnancy
  - increase adolescent wellness visits
  - supporting members needs of the rural health providers

**Pains and Gains:** Pains and Gains experienced by members as they do their associated work or solve problems.

<b>Member Pains:</b> the negative emotions, undesired costs, and situations that members experience before, during or after getting the work/job done.	<b>Member Gains:</b> the benefits members expect, desire, or would be surprised by; including functional utility, social gains, positive emotions, and cost savings.
<b>List of Pains</b>	<b>List of Gains</b>
Retention of qualified and culturally competent staff	Increase in health and wellness
CHCs and rural hospitals are not always able to accept students	Healthy babies and healthy women
Gaps and overlaps in services	More rural providers (they stay where they are trained)
Lack of coordination of women's health services	Increased support for family planning
Isolation	Increased access to quality services
Conservative Legislature	Comprehensive services and choice
Lack of adolescent friendly services	Equal access to care
Lack of resources (money , people/staff, and facilities)	More health and human services
Religious backlash for women's health	Increase in adolescent and clinical services
Perceived lack of problem or need	Health equity
Lack of community engagement / involvement	Support for community stakeholders
Cultural acceptance of family planning	
Appropriate use of resources	
Shared vision of women's health issues	

Value Proposition of Products and Services

**Final Description of Business Product/Service:** includes the value proposition and mission, vision, and strategy alignment check-in.

<b>Product/Service</b>	<b>Value Proposition (How does this meet Member Needs and/or Relieve Pains/Create Gains?)</b>	<b>Align with AzRWHN Mission, Vision, and Strategies</b>
<p><b>Sexual violence curriculum for CHW and Promotoras</b></p> <ul style="list-style-type: none"> <li>• in person English</li> <li>• in person Spanish</li> <li>• on-line</li> </ul>	<ul style="list-style-type: none"> <li>• Helps CHWs do their jobs better</li> <li>• Directly impacts our community members lives</li> <li>• Increase access to sexual violence services</li> <li>• Makes discussion about sexual violence a part of health and wellness conversations.</li> <li>• Shines a light on a very dark corner</li> <li>• Increased skills and capacity of individual CHWs</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Mission: Yes</li> <li><input type="checkbox"/> Vision: Yes</li> <li><input type="checkbox"/> Strategies: Yes</li> </ul>

<p><b>Leverage/support local efforts by connecting between network members to fill the gaps. i.e. TA to members or as a conduit</b></p>	<ul style="list-style-type: none"> <li>• Leveraging and improving the services and support for the clients/patients</li> <li>• Better use of time and money, less overlap</li> <li>• Increase capacity to serve – to see more people, provide more services</li> <li>• Success stories can highlight the Network outcomes, show our impact in communities, and encourage more membership applications/interest</li> <li>• Increase reach and visibility Network</li> <li>• Help with the PR of the Network</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Mission: Yes</li> <li><input type="checkbox"/> Vision: Yes</li> <li><input type="checkbox"/> Strategies: Yes</li> </ul>
<p><b>Women’s Health Symposium - annual</b></p>	<ul style="list-style-type: none"> <li>• Developing presenters with topics of interest to broad audience</li> <li>• Attract more members to the Network</li> <li>• Networking opportunity</li> <li>• Leadership recognition</li> <li>• Learning opportunity – diversity of information</li> <li>• Unique – not another event with this focus</li> <li>• Highlighting new speakers and a variety of presenters</li> <li>• Potential for strategic alliances</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Mission: Yes</li> <li><input type="checkbox"/> Vision: Yes</li> <li><input type="checkbox"/> Strategies: Yes</li> </ul>
<p><b>Collaborate with health providers to develop forensic exam sites and to develop well-women care with primary care in clinic to hospital delivery</b></p>	<ul style="list-style-type: none"> <li>• Increase primary care patient population</li> <li>• Increase health of women (more seeking care or seek care sooner)</li> <li>• Increased cohort of trained forensic exam providers</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Mission: Yes</li> <li><input type="checkbox"/> Vision: Yes</li> <li><input type="checkbox"/> Strategies: Yes</li> </ul>

<p><b>Fund physical exam room equipment and service training, facilitate problem solving and project management.</b></p>	<ul style="list-style-type: none"> <li>• Development of a group of certified programs</li> <li>• Increase access to services for victims (decrease travel time and distances for exam)</li> <li>• Forensic Nurse Examiner (FNE) on call when needed</li> <li>• Provide a broader range of services and skill building for providers</li> </ul>	<p><input type="checkbox"/> Mission: Yes  <input type="checkbox"/> Vision: Yes  <input type="checkbox"/> Strategies: Yes</p>
<p><b>Women’s pre-conception health webinar - education to different health care providers. i.e. Clinical and Non-Clinical</b></p>	<ul style="list-style-type: none"> <li>• Increase knowledge and skill</li> <li>• Improve women and children health</li> <li>• Attractive method to gain education</li> <li>• Good for outreach, inform about the Network</li> <li>• Save money to offer a webinar rather than in person training</li> <li>• Reach more people with webinar</li> </ul>	<p><input type="checkbox"/> Mission: Yes  <input type="checkbox"/> Vision: Yes  <input type="checkbox"/> Strategies: Yes</p>
<p><b>Adolescent health champions Develop / award / promote adolescent health champions (identify current, support, train, connect to each other, link to resources, coach)</b></p>	<ul style="list-style-type: none"> <li>• Improving the overall health of the adolescent community (especially regarding Sex, Drugs, alcohol, smoking)</li> <li>• Increasing preventative visits for adolescents</li> <li>• Enabling youth to increase their educational goals</li> <li>• Opportunity to partner with champions to increase visibility of this issue– be a catalist and model for others to aspire to become a champion for adolescent health</li> <li>• Inform network on stragies to improve adolescent wellness</li> </ul>	<p><input type="checkbox"/> Mission: Yes  <input type="checkbox"/> Vision: Yes  <input type="checkbox"/> Strategies: Yes</p>

<p><b>Create connection between CHC, Universities, providers and hospitals for residency opportunities to have on-site experience/application</b></p>	<ul style="list-style-type: none"> <li>• Partnerships with CHCs that already provide care to the rural and underserved for increased educational opportunities</li> <li>• Potential for Residency Development between CHCs and Hospitals. Trainees tend to remain in areas where they train</li> <li>• Help extend services to patients</li> <li>• Having the Network spend time to create relationship or broker this for them, save time and work for providers</li> </ul>	<p><input type="checkbox"/> Mission: Yes  <input type="checkbox"/> Vision: Yes  <input type="checkbox"/> Strategies: Yes</p>
<p><b>Providing the key role of brokering (facilitating, collaboration and problem solving) and cooperation (finding/sharing expertise or resources within network members)</b></p>	<ul style="list-style-type: none"> <li>• Learning new approaches or methods from others</li> <li>• Learning more about resources and information available</li> <li>• Sharing information and resources on Network website – for all rural communities to benefit</li> <li>• Greater visibility to the AzRWHN</li> </ul>	<p><input type="checkbox"/> Mission: Yes  <input type="checkbox"/> Vision: Yes  <input type="checkbox"/> Strategies: Yes</p>

### Promotion and Communication

During the planning and implementation of the work plan, staff and Network members have discussed and created tasks to communicate the value of becoming a Network member and how to learn about our services. These will also apply to communicating our value propositions going forward. The following is a list of activities in which we plan to promote and communicate to rural communities:

- Share information and resources to our membership via email and social media.
- Create an email list of potential and interested entities to share AzRWHN activities and report with.
- Actively seek out and engage with groups who address women and or rural health issues.
- Provide awards to rural providers at the annual Symposium.
- Seek out collaborative opportunities that foster our goals or sustainability.
- Join groups, coalitions or efforts that are complementary to our mission, vision and strategies.

## 3 LEADERSHIP AND OPERATIONS REVIEW

### Leadership Team and Skills

AzRWHN has a Director (paid position) and a Leadership Team (volunteers from the membership) that work together to accomplish the Network goals and strategies. The Leadership Team holds monthly meetings to discuss Network business, which also includes the AzRWHN Director's supervisor and the Coordinator. In addition to monthly Leadership Team meetings, the AzRWHN staff send out a weekly update via email to keep the members informed on activities and plans. See attached *AzRWHN Communication Plan*.

### Key Initiatives

AzRWHN has been focused on expanding its membership as well as providing support and training to rural providers. Members and staff are promoting the services of the Network when and where there is a potential fit. The staff has also done a lot of outreach and collaboration with other organizations and providers to increase awareness of the Network and collaborate on activities that coincide with our goals.

### Key Resources and Infrastructure

Given that AzRWHN works in rural communities statewide, it is important to have resources for paid staff and travel costs. In addition, most rural providers do not have surplus funds to support training or travel to events and meetings, so resources for these costs are vital to supporting this population. There are so many different aspects to women's health, so it is important to have diverse members and partners who provide expertise in supporting and training on this broad spectrum. The staff and Leadership Team spend a lot of their time fostering collaborations and doing outreach to support the Network's ability to fulfill the work plan. The coordinator also spends time on fostering relationships but spends most of her time planning and implementing the key services of the Network. The Director and the Coordinator work closely as a team to ensure that the tasks and activities from the work plan are carried out.

### Key Partners

The key Network partners are Canyonlands Healthcare (the fiscal agent), AACHC and the founding members of AzRWHN. All of these partners are a vital resource and support to the success as well as the continued functioning of the Network.

Canyonlands Healthcare has a vital role as the fiscal agent and some administrative oversight for the Network. They provide the guidance and staffing in order to have the current HRSA grant and provide the needed resources for the Network staff to carry out the goals and program operations. Their leadership and management has been invaluable to the success of AzRWHN.

AACHC houses the paid staff for the Network, has administrative oversight of Network activities and supervises the AzRWHN Director. Being housed in the statewide PCA has geographic and resource benefits as well as being a symbiotic relationship in achieving the goals for the Network and the PCA.

The founding members, many of which are on the Leadership Team, provide great insight and direction for the forward momentum of the Network. Their historical knowledge, relationships around the state as well as their positions in the health care field has made the Network more visible. This has been instrumental in supporting the Network overall as well as essential to helping Network members achieve their goals. For example, one member is part of the University of Arizona's College of Public Health, who has been instrumental in connecting staff with key partners and the Center for Rural Health, so that both parties can work together on achieving training goals.

### Evaluation Dashboard

The AzRWHN Coordinator created a broad stroke dashboard of the Network's goals and accomplishments that can be viewed by anyone on the website. This is available at <http://azrwhn.org/about-azrwhn/programs>. Furthermore, the Director has a spreadsheet document with more of the tasks and deliverables from the work plan to provide an update at the quarterly face-to-face meetings. In addition to the Dashboard and spreadsheet, the Network has a paid evaluator who meets with the staff regularly to help track accomplishments, communicating progress and support the evaluation of the Network itself and their activities.

## 4 FINANCIAL OUTLOOK

AzRWHN has benefited from the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA) Rural Health Network Planning and Development grants over the last 8 years as the main income. In 2008, the Council applied for and received funding for a one-year HRSA Planning Grant, which led to the Network expanding and being renamed the Arizona Rural Women's Health Network (AzRWHN). In 2011, the Network was awarded the first three-year HRSA Network Development Grant and then a second one was awarded in 2014.

The 2008 Planning grant was for \$85,000. The 2011 Development Grant award was \$539,455 total or \$179,818/year for three years, and the second (2014) Development Grant was awarded for \$900,000 or \$300,000/year for three years. The Planning grant was used to further development of the Network as well as assess, coordinate, and respond to the multiple issues that shape rural women's health in Arizona. The success and momentum of this funding lead to the 2011 and 2014 Development Grant requests. The 2014 grant started September 1, 2014 and the additional funding allowed the Network to

hire a second staff person, the Coordinator position. This three year grant, assuming the year 3 non-competitive renewal is granted, will provide resources for the project until August 31, 2017.

Estimated Operations Cost

The following budget is an estimate of the costs required to maintain the Network as it currently exists with the resources to continue the core goals and strategies. Eliminating some of the tasks and activities specific to the sexual violence efforts currently in the AzRWHN’s strategic plan will reduce the operating costs, as reflected below.

Item	Costs
Staff - Director, Coordinator, office support and ERE costs	\$ 185,000.00
Admin - rent, phone, internet, alarm, etc.	\$ 6,200.00
Supplies - office supplies, printing, etc.	\$ 2,500.00
Meeting & Training Costs - in person and online/webinar events	\$ 12,000.00
Travel - In state travel for meetings and training events	\$ 8,500.00
Women’s Health Symposium - annual training and award event	\$ 10,000.00
Contractors – evaluation, trainers, special projects, etc.	\$ 24,000.00
Membership Dues	\$ 1,600.00
<b>TOTAL</b>	<b>\$ 249,800.00</b>

Projected Revenues

At this time AzRWHN does not have a projected revenue source. The Network is still in the process of deciding what, how and if it can create revenue. The potential revenue areas to consider are:

- Membership Dues – currently no dues are charged to be a member
- Training Costs – everything but the annual Symposium has been provided at no cost
- Selling the *Sexual Violence Curriculum for Community Health Workers and Promotoras* and/or the Train-the-Trainer curriculum to anyone who wants a copy
- Other grants or foundations funds

The main concern with charging fees for activities and membership stems in the audience that the Network aims to support. The main drive in having the Network is to provide resources and growth opportunities to rural communities that do not always have the means or ability to do this on their own. Many have limited budgets that can only support the minimum needs and requirements in order to provide services. In some places the Community Health Workers are volunteers or part-time due to the lack of funding for these staff members.

Only once has the Network charged a fee for participation, and that was recently at the AzRWHN’s 2016 annual Women’s Health Symposium. This was the first year a Symposium was offered; so for the first year a small registration fee was charged to help offset the cost of the event. As the event grows and gains more interest it is likely that the Network can charge a higher registration fee, but the goal will be to try and have a reasonable cost with at least 5-10 scholarships available.

### Pro forma Scenarios

AzRWHN still has decisions to make about the financial future and how this may impact the services provided. The sale of the curriculum is probably the least lucrative option to help sustain the Network long term. Even if the curriculum is advertised nationally for purchase, the first year may see a lot of sales, but after that there may not be a steady stream of interest. Therefore selling the curriculum may result in very little annual income.

The biggest possibility will be in annual membership dues and training fees. This will require the earned interest and trust of rural communities to desire as well as rely upon the benefits and services of AzRWHN. Overall the Network is still in its infancy to be at the level where providers and organizations are more than willing to pay an annual membership fee for this service. Even if the Network achieves the attention and reliance from the providers, this does not guarantee that rural providers have the means to pay a membership fee which can fully supports the Network's costs.