

Introduction

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The 14 National Centers of Excellence in Women's Health (CoE) have been designated since 1996 to develop innovative national model program projects for comprehensive, integrated, interdisciplinary, and coordinated women's health care; public and health care professional education; research; community outreach; and faculty leadership development/opportunities for women. Located in leading academic health centers across the U.S. and Puerto Rico, the ultimate goals of the CoE program are to improve the health of all women across the life span and among diverse populations, and to address the inequities in women's health.

In order to address the changes and challenges facing women's health in the next century, the CoEs are developing standards of excellence in women's health care, research, leadership, training, and education. They are also helping women take more responsibility for their own health through active patient education and outreach, and by making use of newly emerging communication technologies. Additionally, the CoEs address racial and ethnic disparities in health care access and outcomes, and they reach a more diverse population of women than do most traditional women's health centers.

Despite the many accomplishments made in the early 1990s, few academic health centers have actually provided integrated health services. The DHHS Office on Women's Health (OWH) recognized the important role that academic health centers could play in correcting these fragmented women's health efforts, and the CoEs are now trying to change this narrowly focused paradigm. Moreover, the federally funded CoE designation has leveraged considerable funding. With \$12 million in funding from the DHHS OWH from 1996 to 2000, the CoEs have leveraged more than \$130 million in additional funds. The CoEs are now being viewed as leaders in advancing women's health and transforming academic institutions into dynamic centers for women's health.

Women make up a little more than half the population, but they constitute over two-thirds of the buyers and users of health care services. Women's health care can be profitable, and the CoEs are successfully serving as catalysts for deeper changes within the academic health center by expanding the knowledge base on women's health, by increasing the capacity of academic health centers to improve women's health, by increasing women's involvement in their health and health care, and by expanding, improving, and assessing health services for women. Ultimately, it is our hope that these CoE successes will encourage all academic health centers to adapt the CoE model of integrated women's health care.

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Finally, the CoEs understand that in order to truly advance women's health, community involvement and the development of community partnerships are key. To this end, the CoEs are working collaboratively on seven joint projects with a new program created by the DHHS OWH in 2000 called the National Community Centers of Excellence in Women's Health (CCOE). The visible link between the academic health centers, community concerns, and key local coalitions is critical. The CoE and CCOE programs are primarily concerned with a dramatic systems change in the framework for thinking about women's health. We want to create a new approach to health care that can have profound effects on the health of women in this century.