

IN BRIEF | MCH TRAINING PROGRAMS IN SCHOOLS OF PUBLIC HEALTH

The MCH Training Program is an integral part of the Maternal and Child Health Bureau's enduring focus of concern for the nation's women, children, youth and families. From the first four university-based long-term training programs in schools of public health (SPH) established in 1947, several new generations of public health MCH practitioners, scholars, and policy leaders have emerged by virtue of the Title V (Social Security Act) investment in training to create a cadre of individuals able to influence state and national policy, advance research, and set clinical standards.

As of 2009, there are MCH long-term training programs within 12 Schools of Public Health providing leadership to advance the health and well-being of families and children regionally and nationally.

Significance of MCH Education in Schools of Public Health

Focus on Life Course Approach. MCH is distinctive in public health for its emphasis on a lifecourse approach integrating theory and knowledge from multiple disciplines to understand the early antecedents of health trajectories across the life-span. A particular focus is given to the health of parents as they foster healthy child development and buffer the effects of ill health on child well-being. The life course framework also undergirds MCH research demonstrating potential cost savings of prevention in the very earliest years wherein developmentally sensitive and critical periods provide key opportunities for public investment in health.

- These formulations related to life course theory and research have provided a foundation for the Early Childhood Comprehensive Systems initiatives in every state, and also contributed to curricula enhancements in the fields of both developmental, and community pediatrics.

Focus on Education for Leadership. The Association of Teachers of Maternal and Child Health led the development of competencies for MCH educational programs. Subsequently, MCH faculty have done innovative work in defining components of leadership and fostering its development. The results can be seen in the array of positions held by graduates of the SPH programs public health agencies, academia, community-based agencies and philanthropic foundations.

- In FY 2006, SPH programs provided education to 526 long-, 187 medium- and 1,384 short-term students in a range of programs including MPH degrees, other masters programs, doctoral programs, certificate programs, and distance education efforts. Two SPH receive funding for MCH Pipeline programs.
- MCH programs in the Schools of Public Health (SPH) collaborate with MCHB and CDC in building the capacity of the MCH workforce to collect and analyze data focused on at-risk

populations and to turn these data into information for program planning, evaluation, and policy development. This capacity has permitted surveillance activities which provide insights about emerging and persistent MCH related health problems; linkage of datasets that allow for a longitudinal examination of the relationship between maternal, infant, child and adolescent health; and, collection of high-level quantitative and qualitative data for program purposes.

Creation of New Knowledge. Critical to their roles in university settings, MCH faculty have conducted empiric investigations on health development across the life span, with a particular applied focus on how this approach informs service and systems planning, training and policy innovation. MCH faculty work in this arena has spawned models for community level child health systems, and similarly has served as a springboard for conceptualizing the intersection of perinatal and women's health.

- In FY 2006, the MCH programs in SPH published 557 peer-reviewed journal articles, published 19 books and wrote 56 book chapters.

Building the Evidence Base. A fundamental lynchpin of this investigative activity is using interdisciplinary research to establish the evidence to support the development and implementation of interventions to respond to a variety of maternal and child health concerns. This applied research provides the evidence base for interventions that can prevent or ameliorate poor health outcomes. Inherent in this approach is a commitment to conduct research to assess and improve health systems, programs, and policies related to families and children. For example:

- In one region, MCH training grant faculty are providing the impetus and technical assistance to all regional Title V Directors developing state-wide medical home initiatives that incorporate the life course perspective and the lessons of long-standing pediatric models emphasizing family and community partnerships.

- MCH training grant faculty have teamed up in one state with the Title V program, the Medicaid program, and a variety of foundations to develop new models of care for women who have recently experienced a fetal demise or delivered a low birthweight/preterm infant. The intent of this collaboration is to develop a model of interconceptional care that could be implemented statewide and be eligible for Medicaid reimbursement.

Dissemination of the Evidence. Through continuing education activities and direct technical assistance for practice activities, faculty and students of SPH MCH programs help maintain the quality of MCH services in the community. Taken together, the 12 programs support MCH activities in every state and territory through academic-practice partnerships such as the 2008 needs assessment of the MCH workforce, placement of students in internships in state and local health agencies, federally qualified health centers, community-based non-profits, among other sites. Individual faculty influence policy by their participation in local, regional, national and international expert panels.

In FY 2006, the 12 MCH grantees provided technical assistance to and/or collaborated with 1,493 organizations (44% local, 16% state 4% regional, 22% national, 8.5% international geographic focus) and conducted 1,313 hours of continuing education for 36,000 individuals. Examples include:

- Faculty have produced tools such as the Essential Public Health Services for MCH and the Capacity Assessment for State Title V Programs (CAST-5). A variety of translation and information dissemination activities are undertaken by SPH MCH programs, including publication of newsletters, policy briefs and data books.
- MCH faculty joined efforts regionally with local health departments to increase public health nurses' knowledge surrounding pediatric injury prevention counseling and develop innovative health messages to reach diverse populations of pregnant women.

Paving the Way for the Future

Maintaining strong educational programs in MCH at Schools of Public Health is critical to the national public health enterprise. Demographic shifts and healthcare reform underscore the importance of the theoretical and applied perspectives of MCH.

- As the percentage of the elderly population increases, the burden of chronic illness will place increasing demands on services and healthcare funding. Research is now supporting the concept that much of this burden can be prevented, or at least postponed with early interventions in childhood and adolescence
- Among developed countries, the US ranks distressingly low in child health indicators. This lack of investment in the health of children and their families not only has long-term implications for the individual child's health, but also the health of the next generation of children through poor health among women.
- The increasing diversity of American children requires thoughtful and culturally competent approaches to understanding their needs and developing effective interventions.
- Diversity also includes the variety of abilities that children have, and there is a need for professionals with the knowledge and skills to develop approaches to maximize the functioning of all children—including those with special needs—to lead productive lives.
- Addressing the needs of children means working across service sectors in a way that has not been characteristic of other age groups (rightly or wrongly). Thus, we need professionals with knowledge of social services, educational services, nutritional and other services, and the commitment and skills to develop integrated systems of care.
- Finally, the delivery and financing of services for children and families is quite complex. Not only do we have several different funding streams for healthcare, but funding for essential services may come from multiple sectors. There must be professionals fluent in the issues of organizing packages of services with different funding streams, while improving the quality of those services, so all children and their families have access to appropriate care.

MCH Graduate Training Programs in Schools of Public Health

Boston University
 Harvard University
 Johns Hopkins University
 Tulane University
 University of Alabama at Birmingham
 University of Arizona, Tucson
 University of California at Berkeley
 University of California at Los Angeles
 University of Illinois at Chicago
 University of Minnesota
 University of North Carolina at Chapel Hill
 University of Washington

The MCH programs in Schools of Public Health have a proven track record for meeting these challenges with well trained MCH professionals.