

Public MCH Program Functions Framework

Summary

Essential Public Health Services to Promote Maternal and Child Health in America

In recent years, the health care system in the United States (U.S.) has gone under close scrutiny and marked changes. Major transformations are occurring in the public and private sectors of the Nation's health care financing and delivery systems. In the near future, managed care and integrated delivery networks promise to be the predominant means by which individuals in the U.S. access and receive their health care.

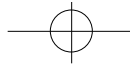
As health care financing and delivery systems evolve and change, specific public health functions remain the critical means by which local, state, and federal agencies fulfill their responsibility to protect and promote the Nation's health. The Institute of Medicine (IOM) Report, *The Future of Public Health*, characterizes the core functions of public health as assessment, policy development, and assurance. In a 1994 document entitled *Public Health in America*, the Public Health Service, in collaboration with the Institute of Medicine and the leadership of various public health organizations, subsequently identified ten "Essential Public Health Services" which implement the core functions.

Spotlight: Maternal and Child Health

From the outset of renewed attention to restructuring the health care system, public health experts and advocates concerned with maternal and child health have worked to assure accountability for addressing the needs of children, youth, and their families. Such efforts extend beyond attending to the specific characteristics of the health care financing and delivery system to include delineating and supporting necessary public health functions that improve the health of the entire population consistent with national objectives.

The Public MCH Program Functions Framework operationalizes these public health functions specifically for maternal and child health. The framework was developed in 1995 through a partnership between the Maternal and Child Health Bureau (MCHB), the Association of Maternal and Child Health Programs (AMCHP), the National Association of County and City Health Officials (NACCHO), CityMatCH, the Association of State and Territorial Health Officials (ASTHO), and the Johns Hopkins Child and Adolescent Health Policy Center, with the support of key working groups of the U.S. States Public Health Service. The framework draws on and builds on the extensive work of the IOM and the Public Health Service, and explicitly





Why Focus on the MCH Population?

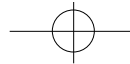
As early as 1912, with the establishment of the Children's Bureau, this country recognized the special vulnerability of women, infants, children, and adolescents. The unique social, biological, developmental, dependency factors that characterize this population create correspondingly unique needs for social response. When these needs are not met, communities suffer. This is truer today than ever before.

Basic Tenets

Five basic principles informed the development of the framework, and guide the process by which policies and programs affecting women, children, and families are developed and implemented.

1. **Separate standards for women and children are needed**—as a stage of human development, childhood differs significantly from the subsequent years of an individual's lifespan. The health of women likewise is influenced by unique biological and social determinants. An approach that addresses the unique needs of the MCH population, and provides for MCH expertise within both the private and public sectors of the health system must be assured;
2. **Shifts in cultural and ethnic makeup of the population demand special attention in health services design and delivery**— demographic trends portray significantly increasing diversity within the child population over the next 50 years due to differential fertility, net immigration, and age distribution among race and Hispanic-origin groups. The provision of culturally competent services will be dependent upon provider understanding of different cultural meanings of health and health seeking behaviors among the diverse population of families they serve.
3. **Quality needs to be addressed at three (3) levels**— within the personal and public health system: (1) at the level where services are provided to individual women and children; (2) at the level of integrated provider networks; and (3) at the community level.
4. **Governmental mechanisms are essential to assure responsiveness of the system to the unique needs of women, children, and families**— improved health outcomes are documented in countries where governments implement a universal approach in assuring that women, children, and their families have access to preventive and curative personal and population-based health services coordinated with education and social services provided in the community;
5. **A long period of transition will ensue**—restructuring of the U.S. system of health care delivery and financing is occurring at a rapid pace, yet will continue to evolve over a number of years. This indicates the need for public health expertise within the private sector through the development of mutually beneficial public-private partnerships.

Characteristics of the maternal and child health population point to several key considerations that are fundamental to assuring quality health care and optimal health for women, children, and families. These are: (1) emphasis on prevention; (2) the relatedness of health and development; (3) the central role of parents, fami



Ten Essential Public Health Services to Promote Maternal and Child Health in America

1.

Assess and monitor maternal and child health status to identify and address problems.

2.

Diagnose and investigate health problems and health hazards affecting women, children, and youth.

3.

Inform and educate the public and families about maternal and child health issues.

4.

Mobilize community partnerships between policymakers, health care providers, families, the general public, and others to identify and solve maternal and child health problems.

5.

Provide leadership for priority-setting, planning, and policy development to support community efforts to assure the health of women, children, youth and their families.

6.

Promote and enforce legal requirements to protect the health and safety of women, children, and youth, and ensure public accountability for their well-being.

7.

Link women, children, and youth to health and other community and family services and assure access to comprehensive, coordinated systems of care.

8.

Assure the capacity and competency of public health and personal health workers to effectively address maternal and child health needs.

9.

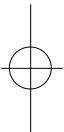
Evaluate the effectiveness, accessibility, and quality of personal health and population-based maternal and child health services.

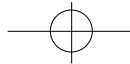
10.

Support research and demonstration projects to gain new insights and innovative solutions to maternal and child health-related problems.

How is the Framework Organized?

The MCH Functions Framework is comprised of three main components: (1) a list of the Ten Essential Public Health Services to Promote Maternal and Child Health in America (see panel above); (2) a list of MCH program functions specific to MCH that apply at all levels of government, and to all populations; and (3) selected examples of local, state, and federal activities implementing MCH program functions (see panel on next page). These three components of the framework are complementary, each

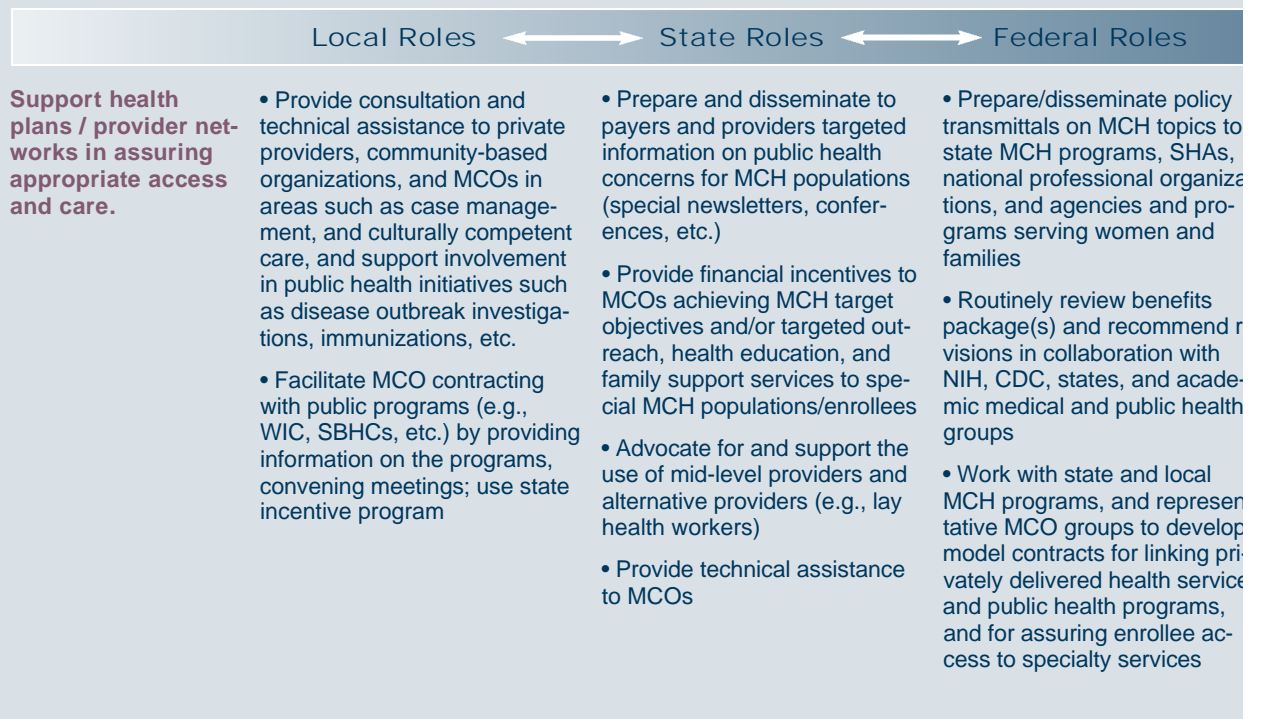




What Are the Uses of the MCH Functions Framework?

The MCH Functions Framework is intended as a tool for policymakers and for state, local, and federal MCH program staff as they formulate legislation and develop budgets, provide leadership in addressing public health problems, create linkages and partnerships with other agencies and organizations, and plan for the future. In this context, the framework may be used to assess agency and program capacities, to focus training and quality assurance efforts, and to develop guidelines for local contractor endeavors.

Assure the capacity and competency of the public health and personal health work force to effectively and efficiently address maternal and child health needs.



How Can We Meet the Needs of the MCH Population?

Clearly, individual providers and networks have roles and responsibilities in all aspects of MCH care. Governmental leadership and oversight of the system, however, is critical in providing direction for and facilitating effective interactions between the health system components to improve the health of the population.

Given the dramatic changes in the Nation's health care financing and delivery system, women, infants, children, and adolescents are increasingly vulnerable. Working with communities--cornerstones of the process by which problems are defined and by which responses are generated, implemented, and evaluated--the public sector is uniquely poised to play a vital role in protecting and promoting the health of the MCH population. State, federal, and local agencies--in collaborative efforts with private health sector providers, purchasers, and community leaders--must be the key players in assuring that the needs of all women, infants, children, and adolescents are addressed, and that policies, programs, and resources are applied and distributed equitably.



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