CHAPTER 37 MATERNAL AND CHILD HEALTH

BOARD OF HEALTH ROLE AT A GLANCE

- ! Promote preventive and primary care for infants, children, adolescents, and adults and provide information regarding available community services and resources.
- ! Provide culturally and linguistically appropriate education and information on maternal, child and family health problems and issues to community residents and health and human service providers.
- Provide information and education to community residents on publicly-funded health insurance programs for income-eligible children and adults, including the Medicaid program (MassHealth) and state-funded programs for income-eligible uninsured populations who do not qualify for Medicaid including: the Healthy Start program for uninsured pregnant women, the Children's Medical Security Program for uninsured children 0-18, the Center Care Program for uninsured adults 19-64, and the hospital free care pool.
- ! Maintain an updated listing of primary prevention and health care activities and programs and services in the community, and provide referrals to community residents about these various local resources including available transportation to care.
- ! Promote screening for pre-school and school-age children in conjunction with local family child care providers, child care centers, and schools, and make necessary referrals to providers and other services.
- ! Work closely with other city or town departments including the School Department, Parks and Recreation, Housing, Police and the Library, as well as other local area providers, advocates, residents' groups, organizations, coalitions and task forces in order to respond in a coordinated manner to the multiple contributing factors to health in the community.
- ! Strengthen existing communication and linkages among local area providers including community health centers, managed care organizations and hospitals, visiting nurses associations, Early Intervention sites, WIC programs, Family Planning Services and other providers.
- ! Identify the city or town's maternal and child health needs by reviewing existing city and town data available to local boards and collecting additional data when necessary.

OVERVIEW

Promoting the health of children and families is an essential public health responsibility. The Healthy People 2000 National Health Promotion and Disease Prevention Objectives lay out many objectives to achieve improved health. Many of these objectives, grouped under Health Promotion, Health Protection and Preventive Services, relate to maternal, child and family health.

In 1990 there were 1,361,021 children ages 18 and under living in Massachusetts, out of the state's total population (6,016,316). Massachusetts' youngest children, ages 0-6, numbered 575,500. While the overall child population has declined somewhat in recent years there is a trend toward increasing racial and ethnic diversity among Massachusetts children. In 1990, more than one in three Hispanic residents and almost one in three Black and Asian residents were under the age of 18. One of seven children in the state lived in a family with income below the poverty line.

Access to health care remains one of Massachusetts' most important public health priorities, as there are still uninsured children, youth and adults in the state. Furthermore, due to the dramatic restructuring of the health care system and the rapid movement from fee-for-service health care to a largely managed care system, even among publicly and privately insured individuals and families, there is concern related to access and quality of care, especially for vulnerable populations.

In 1995, 81,562 infants were born to mothers residing in Massachusetts, a 12.4% increase in the number of births from 1980, but an 11.8% decrease since 1990. Over 77% of Massachusetts births were to white non-Hispanic mothers; Hispanic women accounted for 9.9% of all births; black non-Hispanic women accounted for 7.2% of all births; and Asian women accounted for 4.2%.

The state's infant mortality rate (IMR) has been declining in recent years. In 1995, the IMR was 5.1 deaths for every 1,000 live births, the lowest recorded in the Commonwealth's history and lower than the 1995 U.S. preliminary rate of 7.5. Of continuing concern, however, is the disparity between the white IMR and the black IMR. In 1995, the IMR for infants born to black non-Hispanic mothers was 11.1, 2.5 times higher than the white non-Hispanic rate. In 1995, 89.3% of pregnant women received prenatal care in the first trimester. While white non-Hispanic women have met the Year 2000 objective of increasing to at least 90% the proportion of pregnant women receiving prenatal care in the first trimester, Black, Hispanic and Asian women continue to fall below this target.

The teen birth rate has also continued to decline in the state. In 1995, 29.2 live births occurred for every 1000 females ages 15-19, a 17.5 % decrease since 1990. This rate was 32% below the 1995 U.S. preliminary rate of 56.9. However, a number of cities in the state including Holyoke, Lawrence, Springfield, Chelsea and Southbridge have disproportionately high teen birth rates well in excess of the state and national rates. In 1994, there were 6,567 births to teen mothers; 3,303 were to white non-Hispanic teens, 997 to blacks, 1,950 to Hispanics and 188 to Asians.

There are other important child, adolescent and maternal health issues. The rates of immunization among children insured by Medicaid under two years of age range from 76% to 90%; similarly, the rates for Medicaid clients for annual preventive health care visits for children

ages 2-6 range from 55-81%, and the rates of annual anticipatory guidance for adolescents age 13-21 ranges from 22% to 35%. Asthma is an increasingly serious problem, accounting for over 10% of hospital discharges among Massachusetts children under 20 in 1991; many of these hospitalizations may have been preventable. Other adolescent health issues of concern include tobacco, alcohol and drug use, intentional violence, risk for HIV and other STDs, depression, suicide, date rape and other forms of sexual assault. Too many women in childbearing years do not regularly access health care providers for on-going preventive and primary women's health care before and after pregnancies.

The Massachusetts Response

The federal Medicaid program has provided health insurance coverage for qualified low-income families and children since the 1960's. Over the last several years, Massachusetts has made important strides in implementing state-funded insurance programs to address the thousands of uninsured individuals and families in the Commonwealth who do not qualify for Medicaid, do not have health insurance coverage through their employers, and cannot afford private insurance.

These programs include 1.) the Healthy Start program, begun in December 1985 to improve access to health care for uninsured pregnant women; 2.) the Children's Medical Security Plan, begun in 1992 to provide health insurance coverage for uninsured children 0-18 years of age; 3.) the Center Care program, begun in 1992 to provide health insurance for low-income insured adults ages 19-64 and; 4.) CommonHealth, the state program that permits families who have a child with special health care needs or adults with disabilities to purchase Medicaid on a sliding fee when they would otherwise be financially ineligible.

In addition to reducing financial barriers to access to care through these programs, Massachusetts has expanded the number of children 0-3 served by the Early Intervention Program. Also expanded significantly through state action are the numbers of pregnant and parenting women and children under 5 years served by the Massachusetts Women, Infants and Children Nutrition Program (WIC), which provides free food, nutrition information and health and social service referrals to low-to-moderate income families. WIC also provides other services such as immunization screening and referrals.

Community-based home visiting programs have been implemented throughout the state that identify pregnant teen and adult women who do not receive care. The programs also provide needs assessment, counseling, education, support and referrals for them and their infants during pregnancy and the first years of life. The chapters in this manual on immunizations and childhood lead poisoning prevention provide additional information on maternal and child health activities that Massachusetts is undertaking.

BOARD OF HEALTH RECOMMENDED ACTIVITIES

The responsibilities listed below are suggested activities for boards of health within the area of maternal and child health.

! Provide information to residents of the city/town on health insurance programs in Massachusetts including MassHealth (the Massachusetts Medicaid program), Children's

Medical Security Plan, Healthy Start, Center Care, CommonHealth as well as the hospital free care pool, using outreach, information dissemination and health education mechanisms through schools, local community newspapers and shopping circulars, community cable television, community coalitions, community partnerships, tenants organizations, religious organizations, libraries, and other community-based organizations.

- ! Provide information to community residents on maternal and child health topics including but not limited to: the importance of preconceptual and ongoing women's health care, the importance of early and continuous prenatal care, family planning, STDs, HIV/AIDS among pregnant and parenting women, children and adolescents, prevention of SIDS, smoking and environmental tobacco smoke, breastfeeding, nutrition, parenting, family support, family literacy, and other topics.
- ! Promote public awareness of the location, hours, and services of community health centers and other local providers of pediatric, adolescent health and adult care.
- ! Conduct or participate in health risk screening for children and adults.
- ! Identify maternal and child health priorities in the community through review of existing data and participation in other data collection and analysis efforts.
- ! Work with other city and town departments (housing, parks and recreation, etc.) and local providers, residents, task forces and coalitions to promote healthy environments for children, adolescents and adults living in the area.

STATE RESPONSIBILITIES

The Massachusetts Department of Public Health has the following responsibilities:

The Department's Bureau of Family and Community Health (BFCH) is committed to protecting and improving the health status, functional status, and quality of life of Massachusetts residents across the life span, with special focus on at-risk populations, low income groups and cultural and linguistic minorities. BFCH focuses its efforts and resources in maternal, child and family health on prevention, health promotion, and primary care health services. The BFCH is the state-designated Title V Maternal Child Health Agency. The Title V statute in the Social Security Act mandates states to assure a system of care for all children, youth and families.

The BFCH promotes family-centered care for families and children with special health care needs through the Early Intervention Program and family support activities for children and adolescents with special health care needs. It also supports activities aimed at preventing secondary disability in individuals with special health care needs through the Office of Disability and Health.

The BFCH seeks to reduce barriers to prenatal and pediatric care, family planning and family support services. The BFCH operates child and adult health access programs including Healthy

Start, the Children's Medical Security Plan and Center Care. Through more than 140 WIC Program contracted sites across the state, the Bureau provides nutrition education and counseling, checks for nutritious food and health and social service referrals to low-to-moderate income pregnant and parenting women and young children certified as medically or nutritionally at risk. Numerous other Bureau initiatives include teen pregnancy prevention programs; programs to reduce the impact of HIV/AIDS among children and women; perinatal, pediatric and adolescent primary care programs; family planning services; and injury and violence control programs.

- ! Responsibilities in maternal and child health include:
- ! Assess community health needs throughout the state through the use of various ongoing data and surveillance systems and other research and data collection efforts.
- ! Provide data to local boards of health, community-based organizations and community residents through MassCHIP and other data sources.
- ! Develop and implement policies, regulations and standards related to maternal, perinatal, child and adolescent populations through advisory boards, inter-state agency task forces, committees and other mechanisms.
- ! Assure the delivery of primary prevention activities and primary care services, through: 1.) direct delivery of services and contracts with community-based programs throughout the state to provide these services; 2.) training and capacity building; 3.) production and dissemination of informational and educational materials for providers and the public (e.g., the Office of Rural Health newsletter, school health newsletter, the Child Health Diary); and 4.) ongoing technical assistance to local agencies providing prevention and health care services.
- ! Other state agencies involved in maternal and child health issues include:
- ! The Massachusetts Division of Medical Assistance

The mission of the Massachusetts Division of Medical Assistance (DMA), the state's Title XIX Medicaid Agency, is to improve the health status of low income children and adults by providing health insurance to qualified individuals. Currently, Massachusetts provides health care to most Medicaid enrollees through its managed care program (MassHealth).

! The Massachusetts Department of Education

The mission of the Department of Education (DOE) is to provide education to Massachusetts children and adolescents. The Department funds comprehensive school health education programs in school districts throughout the state and other public health-related school initiatives, including the School-to-Work program housed in the Executive Office of Education. DOE also provides family literacy and support programs.

! The Massachusetts Department of Social Services

The mission of the Massachusetts Department of Social Services (DSS) is to prevent child abuse and neglect and to protect and promote the welfare of Massachusetts

children and families. DSS acts as the Commonwealth's child protective agency, making it the guardian of children in state custody. As the guardian for these children, DSS is responsible for all services that the children receive, including a safe place to live, child care if needed, education, and monitoring of health services.

! The Massachusetts Department of Youth Services

The Massachusetts Department of Youth Services (DYS) is the juvenile justice agency of the Commonwealth of Massachusetts. The mission of DYS is to protect the public, prevent crime and promote positive opportunities for juvenile offenders. DYS provides urgent/emergent health care for pre-trial detainees and comprehensive primary care for youth who are committed to DYS facilities. DPH provides support to DYS by conducting preventive health education for the youth on such topics as HIV/AIDS and STDs, and by providing TB and HB immunizations. DYS also receives technical assistance regarding medication administration issues.

! The Massachusetts Office for Children

The Massachusetts Office for Children (OFC) is the state agency that regulates, licenses and monitors thousands of home-based or center-based child care programs located throughout the state. OFC receives and investigates complaints and can provide reports of substantiated complaints against providers. OFC also certifies staff in early childhood programs, as well as develops regulations related to group care for children and licenses this care.

! Massachusetts Department of Mental Health

The Department of Mental Health (DMH) provides treatment services for children and adolescents with serious mental illness or emotional disturbance.

! Massachusetts Department of Mental Retardation

The Department of Mental Retardation (DMR) provides a range of supports to children who meet the agency's eligibility criteria. This includes children over the age of three with diagnoses of developmental disabilities, such as mental retardation, autism or cerebral palsy. Many of the children whose families receive services and support from DMR have conditions that affect both cognitive and physical development and function.

! Massachusetts Rehabilitation Commission

The Massachusetts Rehabilitation Commission provides services for adolescents with disabilities in transition, including assistance with independent living, supported living arrangements and vocational rehabilitation.

! Massachusetts Commission on the Blind

This state agency provides case management services for children and adolescents who are blind.

! Massachusetts Department of Revenue

The Department of Revenue (DOR) assists in the establishment of paternity for the purposes of paternal child relationships, visitation, financial support, adoption and children's benefits.

FEDERAL RESPONSIBILITIES

Federal agencies with responsibilities in maternal and child health include a number of agencies and bureaus of the Department of Health and Human Services (DHHS) including the Maternal Child Health Bureau, the Administration for Children and Families, the Bureau of Primary Care, the Health Care Financing Administration, and the Centers for Disease Control and Prevention. Another agency with maternal and child health responsibility is the U.S. Department of Agriculture, which supports the WIC program.

Title V of the federal Social Security Act enacted in 1935 provides annual support for maternal and child health services in each state through the Maternal and Child Health Services Block Grant.

The federal Child Nutrition Act is the supporting legislation for the WIC program.

RESOURCES

For information about DPH-funded programs in maternal and child health throughout Massachusetts, please call the Bureau's Division of Maternal Child and Family Health 617-624-6060, or the Division of Children with Special Health Care Needs in Boston at 617-624-5070, or the DPH Bureau of Family and Community Health Regional Manager in the DPH regional office nearest you.

Technical assistance for families of children with special health care needs as well as information and referrals given by parent consultants are provided through each of the DPH regional offices.

! Information, assistance, and referrals for pregnant women without health insurance are provided by Healthy Start staff in each of the DPH regional offices.

Toll free hotlines for the public throughout Massachusetts include:

! The Healthy Start Program:

Greater Boston: 1-800-531-2229 Central Mass: 1-800-227-7748 Northeastern Mass: 1-800-992-1895 Western Mass:: 1-800-992-6111 Southeastern Mass: 1-800-642-4250

The Children's Medical Security Plan:

1-800-CMSP (2677)

In Berkshire, Hampshire and Franklin counties, the toll free number is 1-800-909-2677

! The WIC Program:

1-800-WIC-1007

! The Public Benefits Hotline:

1-800-882-1435 (This hotline provides information about SSI eligibility, CommonHealth and other public benefits for children and adolescents with special health care needs).

Educational materials available from the Department of Public Health include the following:

- ! The Children's Medical Security Plan (CMSP): One-page fact sheets and brochures about the program about eligibility and the services covered under CMSP are available in English, Spanish, Russian, Portuguese, French and Cantonese.
- ! Healthy Start Program: Brochures and posters are available in English, Spanish, Chinese, Haitian Creole, Portuguese, French, Vietnamese, Laotian and Cambodian/Khmer.
- ! Family Planning Program: Materials are also available in different languages. To order CMSP, Healthy Start or Family Planning materials, please call (617) 624-6060.
- ! WIC Program: Brochures, fliers and posters are available in nine languages, including English, Spanish, Portuguese, French, Vietnamese, Chinese, Khmer, Laotian and Russian. To order WIC materials, please call the WIC Program at (617) 624-6100.
- ! Early Intervention Program: Public awareness materials are available. To order them, please call your nearest EI office or the Division for Children with Special Health Care Needs at (617) 624-5070.
- ! Division of Maternal, Child and Family Health: For materials on breastfeeding, smoking during pregnancy, exposure to environmental tobacco smoke, family planning, nutrition, immunizations and other topics, as well as the Child Health Diary, please call (617)-624-6060.

DPH also publishes annual Birth and Death data books. The Birth Data Book includes statewide data summarized from Massachusetts birth certificates by age of the mother, race/ethnicity, and city/town of residence as well as infant mortality, low birthweight and prenatal care utilization rates. Extensive community data packets for the Commonwealth's largest towns are also available. For copies of birth and death data reports, please call the DPH Bureau of Health Statistics and Research at (617) 624-5600.

For other data publications including the Adolescent Birth Data Book and "Refugees and Immigrants in Massachusetts: An Overview of Selected Communities," please call the Bureau of Family and Community Health at (617) 624-6060.

Information about the MassCHIP (the Massachusetts Community Health Information Profile) database can be obtained by calling (617) 624-5541 or the tollfree MassCHIP number, 1-888-MASCHIP. MassCHIP is a dynamic, user friendly information service developed by DPH which provides DPH contractors, health care providers and community agencies with easy access to 18 different health status, health outcome, program utilization and demographic data sets.