

MATERNAL AND CHILD HEALTH

Among the most successful public health initiatives in U.S. history, HRSA's maternal and child health programs annually serve more than 34 million people.

KEY FACTS

HRSA's Maternal and Child Health Bureau administers programs that serve more than 34 million women, infants and children each year. About 60 percent of U.S. women who give birth receive services through HRSA-supported programs.

Most MCHB funds are sent to states through formula-based block grants, which totaled \$662 million in FY 2009. These block grants support vital immunizations and newborn screening tests, along with transportation and case management services that help families access care. States also use block grant funds to develop and implement community-based care systems for children with special health needs and their families.

Additionally, HRSA supports 99 Healthy Start sites in 38 states, the District of Columbia, and Puerto Rico that provide community-based outreach, case management, depression screening and educational activities for women in areas with high rates of infant mortality and shortages of health care providers.

HRSA also collects survey data on the physical, behavioral and emotional health of women and children nationwide. In addition, HRSA publishes and disseminates the Women's Health and Child Health USA databooks.

HISTORY

The federal commitment to addressing maternal and child health can be traced first to the Children's Bureau (established in 1912) and then to Title V of the Social Security Act (enacted in 1935), which focuses on maternal and child health services. Title V converted to a Block Grant Program in 1981.



HRSA administers a broad range of programs services to pregnant women, mothers, infants, children and their families — and children with special health care needs.

The largest of the programs, the Maternal and Child Health Services Block Grant, includes State Formula Block Grants, Special Projects of Regional and National Significance (SPRANS), and Community Integrated Service Systems (CISS) projects. Other vital missions include Universal Newborn Hearing Screening, Traumatic Brain Injury, Healthy Start, Sickle Cell Service Demonstrations, Family to Family Health Information Centers, Emergency Medical Services for Children, and autism.

MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT PROGRAM

To reduce infant mortality, this program provides access to comprehensive prenatal and postnatal care for women; increases the number of children receiving health assessments and follow-up diagnostics and treatment; and provides access to preventive care (including immunizations) and rehabilitative services for children. States must spend 30 percent of their funding on children with special health care needs; 30 percent also must be spent on primary and preventive care for children.

This grant program supports federal and state partnerships that provide gap-filling maternal health services to more than 2.6 million women, and primary and preventive care to more than 27.8 million infants and children, including

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approximately 1 million children with special health care needs.

HRSA also administers the Maternal and Child Health Block Grant set-aside programs of SPRANS and CISS.

SPRANS projects support research and training, genetics services and newborn screening, and treatments for sickle cell disease and hemophilia. CISS projects seek to increase local service delivery capacity and foster comprehensive, integrated, community service systems for mothers and children.

HEALTHY START PROGRAM

Healthy Start provides services tailored to the needs of high-risk pregnant women, infants and mothers in communities with exceptionally high rates of infant mortality. Communities in the 38

states, the District of Columbia, and Puerto Rico served by Healthy Start have large minority populations, high rates of unemployment and poverty, and limited access to safe housing and medical providers. Healthy Start supports community-driven programs in these areas to reduce the prevalence of risk factors that contribute to infant mortality.

Since its inception in 1991, Healthy Start has served hundreds of thousands of families. In Healthy Start projects in 1998, first trimester entry into prenatal care by project participants was only 41.8 percent. By 2004, first-trimester entry into prenatal care had increased to 70 percent. From 2005-2006, 22 Healthy Start communities reported no infant deaths among program participants.

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OTHER MATERNAL AND CHILD HEALTH PROGRAMS

UNIVERSAL NEWBORN HEARING SCREENING

HRSA provides funds to states to establish statewide programs for screening, diagnosis and intervention for infants with newborn hearing disorders.

TRAUMATIC BRAIN INJURY

HRSA provides funds to states to improve access to health and other services for individuals with traumatic brain injury and their families. Grants support state efforts to develop an infrastructure capable of responding to and treating traumatic brain injuries.

EMERGENCY MEDICAL SERVICES FOR CHILDREN

This program is designed to reduce child and youth disability and death due to severe illness and injury. Emergency Medical Services for Children grants go to states, U.S. territories, the District of Columbia and schools of medicine to improve existing emergency medical services systems for treating children and to develop and evaluate procedures and protocols.

CHILDREN WITH AUTISM AND EPILEPSY

HRSA award grants to improve health care and other services for young people with autism spectrum disorders and other developmental disabilities. Funds also are used to conduct research and improve technical assistance to organizations that treat children with autism. Other grants assist young people with epilepsy or seizure disorders.

FAMILY-TO-FAMILY HEALTH INFORMATION CENTERS

This program provides grants to family-run organizations to ensure that families have access to adequate information about health and community resources to allow informed decisions around their children's health care.