



THE MCH
TRAINING PROGRAM:
AN EVALUATION



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IN MEMORIAM

VINCE L. HUTCHINS, M.D., M.P.H. (1928–2001)

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TRAINING PROGRAM PRIORITIES AND DEFINITIONS

Brief descriptions of the 13 long-term priorities of the Maternal and Child Health (MCH) Training Program are provided below, along with abbreviations and acronyms that are commonly used throughout this document.

INTERDISCIPLINARY PRIORITIES

Leadership Education in Adolescent Health (LEAH)

The purpose of the LEAH priority is to provide interdisciplinary leadership training, faculty development, continuing education, scholarship, technical assistance, and collaboration with MCH programs, Title V programs in state departments of public health, state adolescent health coordinators, policymakers, and professional organizations concerned with the health of adolescents. Leadership training produces the next generation of leaders who will influence and train clinicians, public policy and public health experts, investigators, and educators. All of these individuals will move the field forward by improving clinical services, program development, and research/evaluation. The professionals trained include physicians, nurses, social workers, nutritionists, and psychologists.

Leadership Education in Neurodevelopmental and Related Disabilities (LEND)

The LEND priority trains individuals to improve the health of infants, children, and adoles-

cents who have, or are at risk for, developing neurodevelopmental or related disabilities. LEND prepares trainees from a wide variety of professional disciplines to assume leadership roles and to ensure high levels of clinical competence. LEND objectives include the following: (1) to advance the knowledge and skills of the full range of child health professionals in order to improve health care delivery systems for infants, children, and adolescents with developmental disabilities; (2) to provide high-quality education for health professionals; (3) to provide a wide range of health professionals with the skills needed to foster a community-based partnership of health resources and community leadership; and (4) to promote innovative practice models that enhance cultural competence, partnerships among disciplines, and family-centered approaches to care. Professionals trained include physicians, nurses, social workers, nutritionists, speech-language pathologists, audiologists, pediatric dentists, psychologists, occupational therapists, physical therapists, and health administrators. Recently, parents of infants, children, and adolescents with neurodevelopmental disabilities have been added to the faculty of LEND projects as consultants.

Pediatric Pulmonary Centers (PPC)

Pediatric pulmonary centers prepare health professionals for leadership roles in the development, enhancement, and improvement of community-based, family-centered care for infants, children, and adolescents with chronic respiratory diseases, including asthma. PPCs collaborate with other MCH agencies and professional organizations in the development of materials of regional and national significance, such as professional education materials and clinical practice guidelines, and in the provision of continuing education. They also engage in active partnerships with state and local health agencies and health professionals and serve as models of excellence in training, service delivery, and research related to the prevention and treatment of chronic respiratory conditions in infants, children, and adolescents. Professionals trained include physicians, nurses, nutritionists, pharmacists, respiratory care practitioners, and social workers.

Schools of Public Health (SPH)

Training projects in schools of public health aim to (1) educate future leaders and assist current leaders in solving MCH public health problems; (2) discover and test solutions to these problems by conducting applied research; and (3) improve the health status of women, infants, children, and adolescents through technical assistance to communities. The programs use a competency-based curriculum designed to train students to become leaders in public health practice, research, planning, policy development, and advocacy.

UNIDISCIPLINARY PRIORITIES

Behavioral Pediatrics

The purpose of behavioral pediatrics training projects is to enhance behavioral, psychosocial, and

developmental aspects of general pediatric care. The projects support fellows in behavioral pediatrics to prepare them for leadership roles as teachers, researchers, and clinicians. In addition, these projects provide pediatric practitioners, residents, and medical students with essential biopsychosocial knowledge and clinical expertise.

Communication Disorders

The communication disorders priority trains speech-language pathologists and audiologists to provide comprehensive services to infants, children, and adolescents and to promote the advancement of the field through information and knowledge dissemination. Speech-language pathologists and audiologists are trained for leadership roles in education, service, research, administration, and advocacy.

Historically Black Colleges and Universities (HBCU)

This priority has a dual purpose: (1) to enhance the education and training of residents in obstetrics, adolescent gynecology, family practice, and pediatrics for the provision of primary care in community-based settings, especially for underserved populations; and (2) to stimulate the interest of African-American and Hispanic high school and college students in MCH-related professions through mentorship programs.

Nursing

The purpose of the nursing priority is to provide postprofessional graduate training in nurse-midwifery, pediatric nursing, and adolescent nursing, with the goal of ensuring MCH leadership in academia and community-based health programs. The nursing projects also provide continuing education to nurses in the field.

Nutrition

This priority aims to promote healthy nutrition of infants, children, and adolescents by providing graduate training to nutritionists and registered dietitians who are prepared for public health leadership roles. In addition, short-term training (e.g., 1-day continuing education, week-long intensive courses, 3-week to 3-month practica) is provided to individuals from a variety of disciplines, including obstetricians, pediatricians, nurses, and nutritionists, focused on both clinical and public health approaches to maternal and infant, child, and adolescent nutrition.

Pediatric Dentistry

This priority provides postdoctoral training for pediatric dentists designed to foster leadership in administration, education, and oral health services. Attention is focused on infants, children, and adolescents with special health care needs, including those with behavioral problems. In addition, high-risk populations, such as children of migrant farm workers, Native American children, and children from low-income families, are targeted for provision of clinical dental services.

Pediatric Occupational Therapy

Increasing access to developmental programs for infants, children, and adolescents with disabilities, and ensuring that such programs are culturally competent and community-based, are the goals of this priority. Projects train master's and doctoral students for leadership roles and strive to affect occupational therapy training programs nationwide through the development and dissemination of educational resources, continuing education, and technical assistance.

Pediatric Physical Therapy

Pediatric physical therapists are needed to improve the functioning, level of independence, and quality of life of the increasing numbers of infants, children, and adolescents with disabilities and special health care needs. This priority provides postprofessional graduate training, including degree programs at the master's and doctoral levels, as well as nondegree offerings for pediatric physical therapists, in order to ensure leadership in education, services, research, and administration. These projects also serve as national and regional resources for continuing education.

Social Work

The social work priority aims to establish centers of excellence that promote public health training for social workers and support trainees to become leaders in their fields. Both master's level and doctoral training are supported. These centers also serve as regional resources for continuing education, and they disseminate educational materials to other social work programs nationwide.