

PROGRAM HISTORY AND STRATEGY

Advances in medical technology, increased survival rates for low-birthweight infants, enhanced understanding of developmental risk factors, and improved identification methods have resulted in increased numbers of children with disabilities and special health care needs. Limited fiscal and human resources, geographic characteristics, and changing demographics present challenges in addressing the needs of mothers and children in today's rapidly changing health care environment. These factors have heightened the need for a greater number of pediatric physical therapists to assume leadership roles in improving the functioning, level of independence, and quality of life for children who have, or are at risk for developing, disabilities. The Maternal and Child Health Bureau (MCHB) pediatric physical therapy training program was designed to prepare pediatric physical therapists to assume leadership positions in developing and improving culturally competent, family-centered systems of care for children and families.

PROGRAM CHARACTERISTICS

The purpose of the training program in pediatric physical therapy is to facilitate a national focus on leadership in the field through the following activities: (1) postprofessional graduate training of physical therapists for leadership roles in education, service, research, administration, and advocacy in programs providing services for the maternal and child health (MCH) population; (2) the collaboration of the projects and other MCH, Title V, and community agencies; (3) the development and dissemination of curricula, teaching models, and educational

resources to enhance the MCH content of physical therapy training programs; and (4) the provision of continuing education, consultation, and technical assistance in pediatric physical therapy that addresses the needs of the MCH community. The pediatric physical therapy training projects serve as regional and national resources for health professionals, families, community-based agencies, and institutions of higher learning.

HIGHLIGHTS

Trainees. Postprofessional program curricula at both the master's and doctoral levels emphasize public health and MCH issues such as family-centered care; incorporate clinical, teaching, and research experiences; include focused mentoring in pediatric physical therapy; and provide interdisciplinary training opportunities. Trainees develop leadership skills in professional, academic, administrative, policy, and research capacities in their positions of responsibility within professional organizations, institutions of higher learning, or community agencies. Additionally, skills in advocacy, policy development, mentoring, program development, and outcome evaluation are developed.

Faculty. The faculty train pediatric physical therapists for leadership roles, advocate for the MCH population, provide regional continuing education for a variety of health care professionals, integrate pediatric physical therapy into local and state health care systems, provide service to their professional associations, and conduct and disseminate research to improve the practice of pediatric physical therapy.



Faculty collaborate with state Title V agencies, public health and community agencies, and other institutions of higher learning to develop curricula centered on the needs of the MCH population.

PROGRAM PROFILE

- In FY 1999, the MCHB pediatric physical therapy program funded three projects, with annual grant awards totaling \$398,000.
- The grant awards range from \$123,000 to \$149,000 per year, with a mean award amount of \$133,000.

Present Grant Recipients

STATE	GRANTEE
OK	University of Oklahoma
PA	MCP Hahnemann University
WA	University of Washington

BIBLIOGRAPHY

U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. 1997. *Maternal and Child Health Center for Leadership in Pediatric Physical Therapy Education: Application Guidance*. Rockville, MD: U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau.

