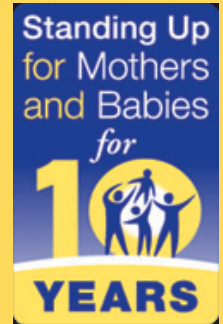




# MCFHC E-Newsletter



VOLUME 4, ISSUE 3,  
AUGUST 2009

## What's in Enews Today?

1. National Health Observances:

August –National Immunization Awareness Month

September –National Infant Mortality Awareness Month

2. MCH Leadership Professional Skills

3. MCH History, Philosophy and Ethics

4. MCFH Coalition 10<sup>th</sup> Anniversary News

5. MCFH Coalition Updates

6. Web Resources

## MCFH Coalition Thanks:

[Sponsoring Members](#) – Lutheran Family and Children's Services, Deaconess Foundation, St. Louis Mental Health Board

## MCFH Coalition Welcomes New and Returning Members:

[New](#) – Celeste Player, Betty Jefferson, Jane Clark, Laura McCune, Sandra McKay, MD, Sue Armstrong, LAMP, Joseph Hazan, MD, St. Louis Center for Family

## 1. National Health Observances

*August – National Immunization Awareness Month:* With the media attention on the new strain of flu circulating the globe, focusing anew on immunizations and their significance is very important. Vaccines protect children and family members from getting fourteen diseases. Prior to immunizations several hundred thousands of cases of these diseases occurred. In 2005, reductions in childhood diseases neared 99% to 100%.

In St. Louis City and St. Louis County, the public clinic immunization percentages reported in 2005 are 80.0% and 94.7% respectively.<sup>i</sup> These percentages represent the percent of two-year olds served in public clinics who received four diphtheria-tetanus-pertussis (DTP), three oral polio virus (OPV) and one measles-mumps-rubella (MMR) vaccines and were therefore considered properly immunized. While these percentages meet the Healthy People 2010 goal of 80.0% immunization for children 19 to 35 months, it still leaves too many children vulnerable to life-threatening diseases.

More information is now known about the interaction of parents, children and grandchildren in the spread of disease and the importance of immunization in limiting the spread. For example, pertussis cases have been on the rise nationally and regionally. It is believed that mothers, fathers and grandparents may have mild forms of the disease that goes undetected making infants vulnerable against the disease. Many hospitals are now immunizing mothers for pertussis while they are still in the hospital after giving birth and encouraging other family members to be immunized.

A study has shown that overall cases of influenza were decreased in the general population when compared with similar cities that did not immunize their school-age children against flu. Immunizations not only protect those immunized but those who are in close contact with those immunized.

Locally, the St. Louis Immunization Coalition has promoted immunizations generally through its coalition activities. It has also focused on adolescent immunization information creating a one-stop shop for adolescent immunizations at [www.startwithfour.org](http://www.startwithfour.org). The Flu Task Force of the Immunization Coalition has sponsored a Flu Information Line and plans several community events to promote flu immunizations. The number for the Flu Information Line is 1-314-644-4358 (644-4FLU). This line will be expanded to provide information about the H1N1 vaccination as soon as the vaccine is available.

*September – National Infant Mortality Awareness Month:* Keeping the spotlight on the issue. As many readers of this article know, the infant mortality rates in certain parts of our region lag behind state and national

Development, LLC,  
Julie Jacobs

Returning – Family  
Care Health Centers,  
Corinne Walentik, MD,  
Brooke Sehy

Visit [www.stl-mcfhc.org](http://www.stl-mcfhc.org)  
to learn more about the  
benefits of membership  
in the MCFHC.

rates. Ongoing research continues to examine reasons and factors that contribute to these deaths. A recent study examined late-preterm births (34-36 weeks of gestation) and found that late-preterm births are on the rise nationally. The rate has increased 20% in 15 years.

The dangers of late-preterm births when compared with full-term births include: greater frequencies of neonatal and postneonatal illness or disease, higher rates of rehospitalization, higher rates of mortality and significantly higher rates of major disabilities.<sup>ii</sup> The study highlights the ongoing need for providers and patients to be aware of the risks and burdens of late-preterm births.

Ongoing study and education of infant mortality is the very reason for the national month of focus. The National Healthy Start Association initiated this important focus while working on reducing infant mortality nationally.

St. Louis Healthy Start continues to shine the spotlight locally on the need for early prenatal care and healthy lifestyles that lead to full-term deliveries. The Coalition was pleased to receive news that project funding has been renewed for five years.

## 2. MCH Leadership Professional Skills

*Organizational Change:* The old saying goes, 'The only thing that stays the same is change.' With the potential of healthcare reform bringing significant change to the approaches to health care in the future, MCH leaders will face ongoing change as the details are worked out and addressed at the state and local level. Managing changes and organizational changes that may accompany this reform effort will be important skills for MCH leadership.

Organizational change is when an organization changes significantly its strategies, programs, or very core of its identity.<sup>iii</sup>

MCH leaders need to understand the emotions and behaviors involved in organizational change and plan in advance how to successfully maneuver through the change. This involves assessing the organization's readiness for change, key steps to a successful change effort and strategies to lead change as well as to respond to change as a leader.

The Bloomberg School of Public Health at Johns Hopkins has an MCH leadership series that includes a detailed module on organization change. It can be accessed at <http://www.jhsph.edu/wchpc/MCHLDS/m5.html>.

## 3. MCH History, Philosophy & Ethics

*Precursors to Maternal Child Health:* While we live in a time when our public health departments are well run and active, the first state board of health was not established until 1883. MA was the first state to do so and called their board the "State Board of Health, Lunacy and Charity."

One of the first health areas of focus for local municipalities was milk stations. The lack of safe milk was one of the key health factors and many infants and children were sickened or died from "summer diarrhea". Nathan Straus, a New York philanthropist started the milk stations for the poor. Milk stations were then inspected and in 1897, Rochester, NY established the first municipally run milk station.

Around the same time, local boards of health started to see the role schools

could play in protecting the health of children. In 1894, Boston started the medical inspections of schools to prevent diseases. Chicago was the first to appoint school physicians.

These precursors laid the groundwork for “The Progressive Period” of the early 1900’s when public health and maternal/child health gained attention and momentum.

#### References

“Maternal and Child Health/Public Health Milestones,” Greg R. Alexander, MPH, ScD, Cathy Chadwick, MPH, Donna J. Petersen, MHS, ScD, MaryAnn Pass, MD, MPH, Martha Slay, MPH, Nicole Shum pert, BS, PowerPoint presentation for The MCH Leadership Skills Training Institute, Department of Maternal and Child Health, University of Alabama at Birmingham.

#### **4. MCFH Coalition 10th Anniversary News**

The Maternal, Child and Family Health Coalition celebrates its 10th year of service! The Coalition was started in 1999 when volunteers recognized the need for a coalition as well as opportunities missed by not having one. With leadership from volunteers and staff of the March of Dimes and the St. Louis Children’s Agenda of Vision for Children at Risk, the Coalition was launched. Ten years later, the Coalition is humbled to have increased its membership and activities to serve the community to insure that all women and children in the St. Louis community are healthy.

In celebration of this achievement by its members, the MCFH Coalition will host Standing Up for Mothers and Babies Award Dinner, Thursday, October 8, 2009 at the Coronado Ballroom, 3701 Lindell Blvd., St. Louis, MO 63108. The event will start with cocktails at 5:30 p.m. Dinner and award presentations will be from 6:30 – 8:30 p.m.

#### **5. MCFH Coalition Update**

The Coalition is pleased to announce the following staff changes:

- Sandy Wells joins as Administrative Assistant
- Regina Robinson joins as Director of Programs leading Healthy Start and FIMR initiatives
- Jill Thompson serves as Director of Programs leading the St. Louis Immunization Coalition and Mapping a Course initiatives

The Coalition has several upcoming events:

*August 21 – 8:30 – 10:30 a.m.* – The St. Louis Immunization Coalition Quarterly Meeting – Hilary Babcock, M.D., MPH will discuss *Mandatory Influenza Vaccination for Healthcare Workers: Translating Policy to Practice*. She will be followed by Ketul Patel, M.D., MPH who will present information on the H1N1 disease, vaccine development and potential distribution. The meeting will be held at North Central Community Health Center, 4000 Jennings Station Rd., St. Louis, MO 63121.

*September 17 – 8:30 – Noon* – The State of MCH – This annual forum focuses on the state of maternal, child health in the state of Missouri and throughout the region. Margaret Donnelly (invited), Director of Missouri Department of Health and Senior Services, Dolores Gunn, M.D., MPH (invited), Director of St. Louis County Department of Health and Pam Walker (invited), Director of St. Louis City Department of Health will speak about the health needs of women, children and families and trends they are seeing. The session will be held at Il Monastero, 3010 Olive, St. Louis, MO 63103.

*October 8 – 5:30 – 8:30 p.m. – Standing Up for Babies 10<sup>th</sup> Anniversary Celebration. (See article above).*

*October 29-30 – 8:30 a.m. – 5 p.m.– Mental Health First Aid - This course is designed to increase mental health literacy, to decrease stigmatizing attitudes in our communities, and to encourage people to seek assistance sooner rather than later for any potential mental health problem. Information and registration to follow soon.*

## **6. Web Resources**

1. National Immunization Awareness Month – CDC Vaccines and Immunization page – Has immunization schedules, provider and parent educational resources, information about diseases vaccines prevent, and updates on the current situation with H1N1 - <http://www.cdc.gov/vaccines/>
2. MO Adolescent Immunization Outreach Initiative web site – [www.startwithfour.org](http://www.startwithfour.org)
3. National Infant Mortality Awareness Month - National Healthy Start Association-Ideas for how to mark the National Infant Mortality Awareness Month - <http://healthystartassoc.org/>
4. St. Louis Healthy Start web page - [http://www.stl-mcfhc.org/healthystart\\_web/HS\\_web\\_page.html](http://www.stl-mcfhc.org/healthystart_web/HS_web_page.html)

---

<sup>i</sup> KIDS COUNT Census Data Online, Citizens for Missouri's Children, <http://datacenter.kidscount.org/data/bystate/Rankings.aspx?state=MO&ind=2007> – Accessed 8-12-09

<sup>ii</sup> Reddy UM, Ko C, Raju TNK, et al. 2009. Delivery indications of late-preterm gestations and infant mortality rates in the United States. Pediatrics 124(1):234-240. Abstract available at <http://pediatrics.aappublications.org/cgi/content/abstract/124/1/234?rss=1>

<sup>iii</sup> Organizational Change and Development (includes the Field of Organization Development)

Written by Carter McNamara, MBA, PhD, Authenticity Consulting, LLC. Copyright 1997-2008 – [http://managementhelp.org/org\\_chng/org\\_chng.htm](http://managementhelp.org/org_chng/org_chng.htm) - Accessed 8-3-09