

## Maternal and Child Health Bureau FACT SHEET

Charged with primary responsibility for promoting and improving the health of the Nation's mothers and children, the Maternal and Child Health Bureau (MCHB) draws upon nearly a century of commitment and experience. Early efforts are rooted in MCHB's predecessor, the Children's Bureau, established in 1912. In 1935, Congress enacted Title V of the Social Security Act, which authorized the Maternal and Child Health Services Programs—providing a foundation and structure for assuring the health of mothers and children for more than 75 years. Today, the Maternal and Child Health Bureau, as part of the Health Resources and Services Administration, U.S. Department of Health and Human Services, administers Title V and other key maternal and child health programs.

Through the Title V MCH Services Block Grant, targeted discretionary grant programs, and other means both formal and informal, MCHB works in partnership with its sister Federal agencies, States, communities, public-private partners, and families to strengthen the maternal and child health (MCH) infrastructure, assure the availability and use of medical homes, and build knowledge and human resources in order to assure continued improvement in maternal and child health. Moving forward, MCHB, its programs and its partners work to address persistent health disparities, assure health equity and address the social determinants of health to promote the health of the MCH population and assure optimal health and development across the lifespan.

*The mission of MCHB is to provide national leadership, in partnership with key stakeholders, to improve the physical and mental health, safety and well-being of the maternal and child health (MCH) population which includes all of the nation's women, infants, children, adolescents, and their families, including fathers and children with special health care needs.*

### **Maternal and Child Health Services Block Grant (Title V of the Social Security Act)**

Central to MCHB's mission, the Maternal and Child Health (MCH) Services Block Grant (Title V of the Social Security Act) has provided, since its inception, a foundation for ensuring the health of our Nation's mothers and children. With the passing of the Social Security Act in 1935, the Federal government, through Title V, pledged its support of State efforts to extend health and welfare services for mothers and children. This landmark legislation resulted in the establishment of State departments of health or public welfare in some States, and facilitated the efforts of existing agencies in others.

Title V is a partnership with State Maternal and Child Health (MCH) and Children with Special Health Care Needs (CSHCN) programs, reaching across economic lines to support such core public health functions as resource development, capacity and systems building; population-based functions such as public information and education, knowledge development, newborn screening; outreach and program linkage, technical assistance to communities, and provider training; enabling services that improve access to health care, such as translation, transportation, and case management; and gap-filling health services, especially for children with special health care needs.

*Title V is the longest-standing public health legislation in American history and continues to work to improve the health of all women and children.*

The MCH Block Grant contains three major funding categories. **MCH Formula Grants to States** are awarded to State health agencies on the basis of the number of children in poverty in a state in relation to the total number of such children nationally, and represent the largest funding component of Title V (roughly 85 percent). Federally administered Discretionary Grants of two types—Special Projects of Regional and National Significance (**SPRANS**) and Community Integrated Service Systems (**CISS**)—are awarded on a competitive basis and support such activities as MCH research, training, and systems building to improve access and equity in health care.

Over the years, the achievements of Title V-supported projects have been integrated into the ongoing care system for children and families. Landmark projects have produced guidelines for child health supervision from infancy through adolescence; influenced the nature of nutrition care during pregnancy and lactation; recommended standards for prenatal care; identified successful strategies for the prevention of childhood injuries; built systems of comprehensive, coordinated care for children with special health care needs; and developed health and safety standards for out-of-home child care facilities. Throughout its programs, MCHB has provided national leadership to promote the medical home, family-centered care, and cultural competence as essential to health care and public health.

## **MCHB ADMINISTERS OTHER KEY PROGRAMS**

**Autism Initiative** Under the authority of the Combating Autism Act, MCHB supports research on evidence-based interventions to improve the health and well being of children and adolescents with ASD and other developmental disabilities; awards grants to States to improve services for this population; and trains health professionals.

**Emergency Medical Services for Children** works in partnership with States, communities, medical institutions, public-private partners, and families to enhance the capability and capacity of EMS systems to manage the emergency medical needs of children in the areas of prevention, pre-hospital EMS care, hospital-based care, rehabilitation and re-entry of the child into the community.

**Family to Family Health Information Centers** are state-wide centers, staffed by families of children with special health care needs (CSHCN) who have expertise in public and private health care systems, that assist families of CSHCN to make informed choices about health care; locate available resources; identify successful health delivery models; foster collaboration between families and health professionals; provide training and guidance; and conduct outreach to families, health professionals, schools and other appropriate entities.

**Healthy Start** projects in over 100 communities nationwide serve pregnant, post-partum, and interconceptional women who are at the highest risk for adverse pregnancy outcomes, their infants and families, to reduce infant mortality, low birth weight, and eliminate health disparities.

**Maternal, Infant, and Early Childhood Home Visiting** This program was authorized by the Affordable Care Act to improve health and development outcomes for at-risk children through implementation of evidence-based home visiting programs.

**Sickle Cell Disease** programs serve individuals across the life span living with sickle cell disease or who are carriers of the sickle cell gene mutation by establishing coordinated, comprehensive and family-centered networks to promote the integration of primary and subspecialty health care within medical homes for persons with sickle cell diseases and other hemoglobinopathies.

**Traumatic Brain Injury** supports States in their efforts to ensure that individuals of all ages with TBI and their families will have accessible, available, acceptable, and appropriate services and supports to facilitate recovery and maximize independence.

**Universal Newborn Hearing Screening** works with the States to ensure that all newborns are screened for hearing impairment, preferably prior to hospital discharge, and that all who screen positive receive appropriate and timely follow-up.

## RESOURCES

**Title V Information System (TVIS)** electronically captures data from annual Title V Block Grant applications and reports submitted by all 59 U.S. States, Territories, and Jurisdictions and provides publically available information on key measures and indicators of maternal and child health (MCH) in the United States.

**Discretionary Grants Information System (DGIS)** captures program and performance data from the more than 900 maternal and child health grants HRSA makes each year. These grants help to ensure that the Nation's women, infants, children, adolescents, and their families, including fathers and children with special health care needs, have access to quality health care.

## **MCHB ORGANIZATION**

- Office of the Associate Administrator for Maternal and Child Health, includes the Office of Operations and Management; the Office of Epidemiology, Policy and Evaluation; and HRSA's Office of Women's Health
- Division of State and Community Health
- Division of Healthy Start and Perinatal Services
- Division of Child, Adolescent and Family Health
- Division of Services for Children with Special Health Care Needs
- Division of Research, Training and Education

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