

# Division of Maternal and Child Health Workforce Development (DMCHWD)

## Maternal and Child Health (MCH) Training Program Handbook

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September 2024



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# Director's Welcome – Trainee Handbook

Lauren Raskin Ramos, MPH, Director  
Division of Maternal and Child Health Workforce Development (DMCHWD)  
Maternal and Child Health Bureau (MCHB)  
Health Resources & Services Administration (HRSA)

Dear MCHB Trainees:

Welcome to the Maternal and Child Health Bureau's (MCHB) Division of Maternal and Child Health Workforce Development (DMCHWD)!

The DMCHWD provides national leadership and direction in educating and training our nation's current and future leaders in maternal and child health (MCH). Our interdisciplinary graduate training and workforce development programs ensure that practicing MCH professionals are equipped to meet the unique needs of MCH populations. As a trainee, you help advance our mission.

Our training programs are dedicated to advancing exemplary practice and leadership in the field of MCH. MCH training programs emphasize four core principles: 1) interdisciplinary training, 2) diversity, 3) family leadership, and 4) supporting the [Title V MCH Services Block Grant](#) program and other MCH systems. In Fiscal Year 2022, MCH training programs trained 29,109 trainees. Additionally, MCH training programs offered continuing education to over 493,295 participants. As a trainee, you are joining a network of MCH professionals around the country who have incredible clinical, academic, and policy expertise in public health that will shape the future of MCH. We encourage you to connect with the trainees in your program and across the nation.

To support you as you navigate through your training and beyond, we have created this *MCH Training Program Handbook* that provides online resources in one convenient location. This includes descriptions of MCH training programs, reflections from past trainees on their experience and how it has shaped their career, and other resources to support your development as an MCH professional.

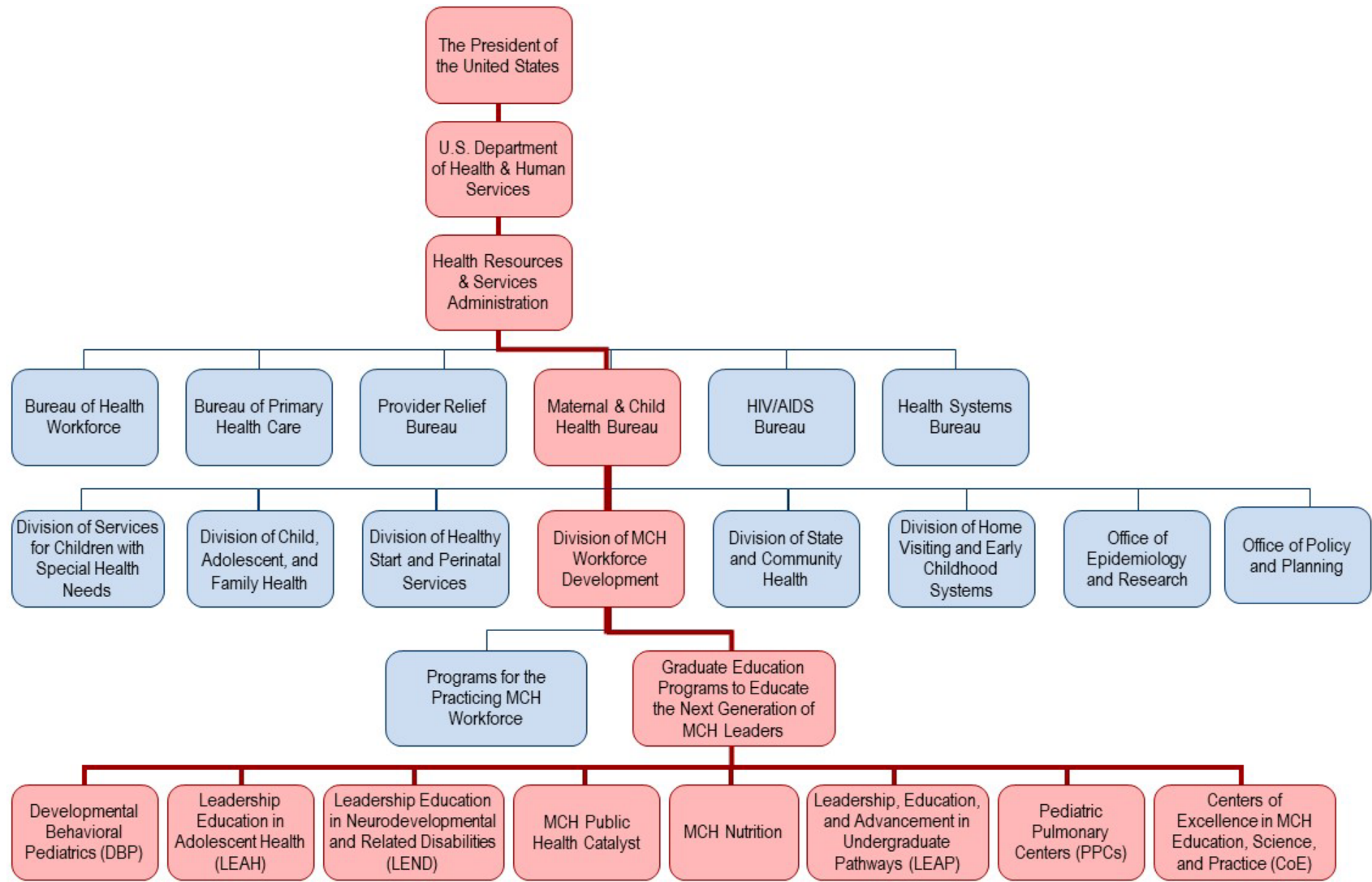
We hope this information is helpful as you embark on a path to shape the health and care of our nation's women, children, and families.

Sincerely,

A handwritten signature in black ink that reads "Lauren Raskin Ramos".

Lauren Raskin Ramos, MPH, Director  
DMCHWD

# DMCHWD Contextual Organizational Chart



[Text description of the DMCHWD Contextual Organizational Chart](#)

## MCH Training Program 101

The DMCHWD aims to improve the health of mothers, children, and families by developing leaders in MCH and building the MCH workforce. The DMCHWD does this by providing training, education, leadership development, and support for MCH professionals.

The DMCHWD provides national leadership and direction in educating and training our nation's current and future leaders in MCH. The DMCHWD also provides leadership through state and community-based capacity-building programs. Special emphasis is placed on the development and implementation of interprofessional, family-centered, community-based, and culturally competent systems of care across the entire life course with experiences in one lifestage shaping health in later stages.

DMCHWD supports programs established in federal legislation ([Title V of the Social Security Act](#), the [Autism CARES Act](#), and [§ 330M of the Public Health Service Act \(42 USC 254c-19\)](#)), as added by the [21st Century Cures Act \(P.L. 114-255\)\(PDF\)](#) and amended by the [Bipartisan Safer Communities Act \(P.L. 117-159\)\(PDF\)](#) to complement state and local health agency efforts. In partnership with state MCH programs, academic institutions, and professional organizations, the DMCHWD collaborates with other health training programs of the federal government to ensure that MCH initiatives are based on emerging and evidence-based practices.

Grants are awarded to develop trainees for leadership roles in the areas of MCH teaching, research, clinical practice, and/or public health administration and policymaking. View the [MCH Workforce Development](#) web page and [fact sheet \(PDF\)](#) for more information on the DMCHWD.

# Trainee Resources

## MCH Leadership Competencies

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The MCH Leadership Competencies is a resource for MCH interdisciplinary training programs, national, state, and local health agencies, and other MCH organizations to support aspiring and practicing professionals by:

- Defining MCH leadership.
- Describing how the MCH Leadership Competencies can be used by a variety of audiences.
- Providing a conceptual framework for the development of an MCH leader.
- Outlining the knowledge and skill areas required of MCH leaders.
- Linking to tools for implementation.

The MCH Leadership Competencies help equip the MCH workforce with the knowledge, skills, personal characteristics, and values to improve the health of MCH populations. Learn about the MCH Leadership Competencies by browsing the [MCH Leadership Competencies](#) web page or by downloading the [resource \(PDF\)](#).

## Listserv

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Join the MCHB-funded Trainees and Fellows listserv. To sign up or update your subscriber preferences, navigate to the [HRSA Email Subscriptions](#) website, enter your email, and follow the prompts.

## Student Internship Opportunities

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The DMCHWD Internship, based in HRSA's MCHB, is designed to educate, engage, and support future leaders in MCH. The DMCHWD accepts applications from highly motivated graduate students in good standing at schools of public health or other health-related training programs in the United States. Visit the [Student Internship Opportunities](#) web page to learn more and apply.

## MCH Navigator

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The MCH Navigator is a centralized portal for pursuing continuous learning in MCH and is designed to help emerging and established MCH professionals map professional growth pathways. The MCH Navigator links learners to existing open-access training, organized in areas consistent with nationally endorsed public health and MCH leadership competencies. In this way, the MCH Navigator can meet the ongoing training needs of a diverse MCH workforce by providing a one-stop shop for high-quality, relevant training. Key site features include a searchable, web-based resource inventory of free learning opportunities, training spotlights on hot topics in the field of MCH, and a library of learning opportunities to support the implementation of the Title V MCH Services Block Grant.

For more information on the MCH Navigator, view the [MCH Navigator](#) web page.

## Trainee Perspectives

MCHB has been funding training programs for several decades. These perspectives reflect trainees that completed MCHB training programs over time and who are at different stages of their careers.

**Alena M. Clark, PhD, MPH, RD, CLC – University of Minnesota, 1998–1999 Nutrition Trainee, MCH Nutrition; Colorado State University, 2004–2005 Nutrition Trainee**



When I started my career as a Registered Dietitian Nutritionist in 1997, my interest area was in Public Health. Upon being admitted into the University of Minnesota’s Masters in Public Health (MPH) Program and offered an MCHB-funded Traineeship, I did not realize at that time how the training, education, and experiences I received would lead me to where I am today. I am currently a Professor in the Department of Nutrition and Dietetics at the University of Northern Colorado (UNCO); I have been at UNCO since 2007. I teach and mentor students in courses such as Lifecycle Nutrition, Breastfeeding: Support and Promotion, and Maternal and Child Nutrition. I

am the immediate past Treasurer for the Academy of Nutrition and Dietetics Women’s Health Dietetic Practice Group.

My areas of research include breastfeeding support, mental health and nutrition, and international nutrition. My colleagues and I have established a successful lactation support program at the University of Northern Colorado and because of the success, we have developed a toolkit to assist other universities in establishing a lactation support program based on our model. In 2015, I was able to go to Cameroon, Africa and provide education to nutrition counselors who work with mothers, infants, and children in their communities on how to encourage and support breastfeeding, and appropriate infant feeding practices.

My interest in Maternal and Child Nutrition was heightened through the work that I completed during the MCH Traineeship while attending the University of Minnesota under the direction of my two mentors at the time – Dr. Mary Story and Dr. Jamie Stang. I also had the opportunity to complete another MCH Traineeship while attending Colorado State University under the leadership of Dr. Liz Adams. The opportunities I received during the MCH Traineeship included program planning, teaching and counseling experiences, research, and policy development, all of which are skills that I continue to use with all of the “hats” that I wear in my current position. I am extremely grateful to have received an MCH Traineeship. This experience in MCH provided the foundation for who I am today.



**Mark Batshaw, MD – Kennedy Krieger Institute, Former Trainee (1975), Leadership Education in Neurodevelopmental and Related Disabilities (LEND)**

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I am the director of the Children’s Research Institute and serve as the Executive Vice President, Physician-in-Chief, and Chief Academic Officer of Children’s National Health System. I also act as the chairperson of pediatrics and associate dean for academic affairs at the George Washington University School of Medicine and Health Sciences, hold the Professorship “Fight for Children Chair in Academic Medicine,” and was elected President of the American Pediatric Society in 2016.

I completed my undergraduate degree at the University of Pennsylvania and attended medical school at the University of Chicago. I completed my residency in pediatrics at the Hospital for Sick Children/University of Toronto in Toronto, Ontario, and my postdoctoral fellowship in neurodevelopmental pediatrics at the Kennedy Institute of Johns Hopkins University School of Medicine.

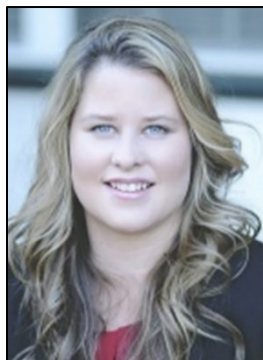
I’ve spent my entire career in the care of children with developmental disabilities. My research is about inborn errors in urea synthesis. I published more than 200 articles and reviews and am the senior editor of the classic textbook *Children with Disabilities*, now in its seventh edition. I continue development in the fields of neurodevelopmental disabilities and developmental-behavioral pediatrics, programs that address issues that confront children with disabilities.

My ability to develop the infrastructure to support child development is what I consider to be the outstanding contribution of my career. I am responsible for establishing training programs, funded by MCHB, in Philadelphia and Washington, D.C. that train professionals to assume leadership positions in the care of children with neurodevelopmental and related disorders. I have successfully developed the research infrastructure and successfully competed for Intellectual Developmental Disabilities Research Centers at the University of Pennsylvania and Children’s Hospital National Medical Center.

These successes, in no small measure, are the result of the experiences gained as a LEND trainee at the Kennedy Krieger Institute.

**Lauren DePaola, MSW – University of Florida (UF), 2010 Social Work Trainee, Pediatric Pulmonary Centers (PPCs)**

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I started my work as a UF PPCs Social Work trainee in 2010. I now have a private practice with a focus on Perinatal Mood and Anxiety Disorders (PMADs). I established the Alachua County Perinatal Mental Health Coalition (ACPMHC) and am now the Executive Director. The ACPMHC is a 501(c)3 nonprofit, with a mission to improve awareness of PMADs in Alachua County, Florida, and expand resources, education, and support systems for those at risk for PMADs in our community and to provide professional development resources to increase provider screening and referral.

The incidence and prevalence rates of PMADs in Alachua County were unknown until last year. Over the past year, the ACPMHC has completed an extensive Maternal Mental Health community needs assessment. The findings of this survey indicate that there is a wide-ranging need for services related to perinatal mood disorders, including raising awareness for



professionals and community members alike, training for health and mental health professionals, and direct services to at-risk mothers.

I am actively involved in advocacy at the national, state, and local levels by participating in the state PMADs coalition. I testified in the Florida Senate on the topic of PMADs and provided testimony at the Florida Governor's Children and Youth Council on this topic. I am currently working with Senator Lauren Book on Florida's first legislative bill addressing maternal mental health. She also works with the National Board of Postpartum Support International.

My UF PPCs traineeship contributed to my awareness of the importance of advocacy and increased my confidence to pursue this. I feel the interdisciplinary aspect of the PPCs training has been helpful in many ways.

### **Alicia Dixon Docter, MS, RDN, CD – University of Washington (UW), 1986–1988 Trainee, Leadership Education in Adolescent Health (LEAH)**

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As I finalized my undergraduate studies, I decided to become a registered dietitian. I took a path that was different from the traditional clinical dietitian at the time – I spent the first eight years of my career developing nutrition education programs for schools in California and then disseminating them throughout the state and across the U.S. When the UW MCH multidisciplinary traineeship presented itself in 1986, I embraced my dream of learning about, experiencing and melding all my interests in the direction of supporting this incredible part of our population.

My MCHB-funded adolescent health traineeship opened doors I never would have anticipated.

Since completing my fellowship, I have had many experiences that have allowed me to help adolescents develop a voice and meet their nutrition and health needs:

- A successful multi-disciplinary private practice seeing adolescents and their families from all over the greater Seattle area;
- Staffing the state's only co-ed prison and working with incarcerated youth; working with sports teams at the high school, collegiate, and professional levels;
- Helping open the UW Adolescent Medicine Clinic at Seattle Children's Hospital (SCH);
- Developing programming in eating disorder and obesity treatment;
- Training new dietitians, medical providers, and social workers as the clinic expanded;
- Developing training in communication methods that are supportive of adolescents (e.g., motivational interviewing); and,
- Developing and evaluating an innovative approach to obesity treatment that incorporates a developmental model in addition to a strengths-based approach.

My current position as a manager in ambulatory nutrition at SCH allows me to influence dietitians in other sub-specialties to incorporate adolescent-centered communication styles and techniques, allowing interactions to be more satisfying for teens and providers. My career dream has been being the Core Nutrition Faculty for the MCHB-funded LEAH training program these last five years. Not only do I have the opportunity to mentor amazing nutrition students and dietitians within the traineeship, but I

am also involved in program development and administration as a faculty and training director where I can work with trainees from all disciplines. As Chair of the Nutrition Committee for the Society for Adolescent Health and Medicine (SAHM), I have been involved in the development of several position papers, articles, book chapters, and numerous workshops. Earlier in 2017, I received the Outstanding Preceptor Award from the UW Nutritional Sciences/School of Public Health.

What a run it's been – and I owe it to my amazing MCH funded adolescent medicine traineeship and my wonderful mentors, Jane Rees and Catherine Holman. Thanks to you, from my family and me.

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**Scott Harpin, MS, MPH – University of Minnesota, 2003 Trainee, Centers of Excellence in MCH in Education, Science and Practice (Schools of Public Health)**

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When I entered the MCH Master of Public Health (MPH) Program, I was already working toward a master's in adolescent nursing at the University of Minnesota. I was taking a handful of public health classes and it became apparent how interdisciplinary the public health, nursing, and adolescent health faculty were. I wanted to be steeped in MCH and, having been a nurse for a long time already, I wanted to be immersed in a different paradigm. I knew public health would give that to me.

I am helping to shape the future of public health through the creation of a one-of-a-kind dual degree program at the University of Colorado. My colleagues and I received an Advanced Nursing Education Program Grant from HRSA's Bureau of Health Professions. With those funds, we will develop a program in which nurses will complete an MPH and then transition immediately into a Doctor of Nursing Practice program.

For most of our students, the advanced nursing education program is fulfilling a need for an education they didn't know existed. So many nurses tell me how much they value what an MPH can bring them professionally, including the possibility of new career options. This new program will allow students to merge their nursing and public health backgrounds.

There are many logistics to deal with when doing a dual degree, but in retrospect, it was so efficient. I had some great mentors and advisors in Minnesota who modeled the type of academic professional that I want to be, so I am happy to have this mix of teaching and research that is meaningful and clinically applicable.

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**Alison Schonwald, MD – Boston Children's Hospital, 2001–2004 Fellow, Developmental Behavioral Pediatrics (DBP)**

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I knew I wanted to work with children, but my DBP fellowship opened the door to a world I did not know existed. I liked complicated children and working with families, long-term relationships, and meaningful projects. Through my fellowship, I found a place where I could make a difference. Clinical care was the focus of my first decade as faculty at a large academic center, staying in the same program where I trained. I spent the next decade refocused on education and training others. My initial clinical interest and research in broadening the practice of developmental screening morphed into educating others on the topic. Through local, regional, and national opportunities, I spend more and more time educating others on topics across our field. I have been involved in multiple roles regarding education and developmental screening at the American Academy of Pediatrics, and I currently serve on

the sub-board of the American Board of Pediatrics. I also sit on the Massachusetts Board of Early Education and Care. As I move into the next chapter of my career outside of an academic setting, I remain committed to interdisciplinary care of children with developmental disabilities across the lifespan, and to contributing to a workforce that will continue to best meet the needs of this vulnerable population.

**Leslie Osorio Pascual, MPH – East Carolina University, 2023 Trainee, Leadership, Education, and Advancement in Undergraduate Pathways (LEAP)**

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As a first-generation Hispanic student, I witnessed the challenges faced by immigrant Hispanic women in accessing healthcare. This firsthand experience fueled my determination to contribute to this community in any way possible, shaping my decision to pursue a career in MCH. Inspired by the impactful mentorship of my professors and their significant contributions to the MCH population, I completed my bachelor’s in public health at the College of Health and Human Performance at East Carolina University. My concentration was in community health, complemented by a minor in nutrition and a certificate in MCH.

Having participated in East Carolina University’s LEAP program, Maternal and Child Health Scholars, Training, and Enrichment Program (MCH-STEP), I recognized the importance of MCH in my academic and professional journey. Subsequently, I enrolled in the MPH program in applied epidemiology at the University of North Carolina Gillings School of Global Public Health. Simultaneously, I am employed full-time as a Social/Clinical Research Specialist at East Carolina University.

The MCH training program has been instrumental in my success, providing me with the confidence and skills needed for meaningful research engagement. It has played a crucial role in my career development, exposing me to numerous opportunities that I might not have discovered otherwise. Currently, my MCH traineeship continues to shape my trajectory, expanding my networking horizons and facilitating connections in other states through conferences and internships.

Participating in the American Public Health Association’s annual meeting and a Title V internship during my undergraduate studies at the Virginia Department of Health allowed me to forge valuable connections and receive mentorship, contributing significantly to my academic and professional growth.

I owe much of my success to my dedicated mentors, Dr. Alice Richman and Ms. Kelli Russell. Their unwavering encouragement and belief in my potential have been pivotal in my journey towards becoming a successful public health professional. I am grateful for the opportunities and support provided by the MCH training program, which has played a crucial role in shaping my current achievements and future aspirations.

## **Donna Johnson, MHS – Georgia State University, 2011–2012 Family Leader, Leadership Education in Neurodevelopmental and Related Disabilities (LEND)**

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As the parent of two (2) autistic twin daughters, I provided training and support on navigating systems, advocating for services, and connecting to resources for families of children with disabilities. I was the Executive Director of a non-profit organization that worked with businesses on making their facilities accessible and welcoming for people with disabilities. I was recruited for the inaugural Georgia Leadership Education in Neurodevelopmental and Related Disabilities (GaLEND) cohort as a family trainee. I engaged with graduate students and early career professionals to help them connect their lived experiences as a family member with their academic training. While participating in GaLEND, I was offered the position of project coordinator for the Autism Plan for Georgia, which was a two-year grant funded by MCHB. Through this grant, I was able to use the skills learned in GaLEND and my voice as a family leader to engage families, build and strengthen partnerships, and coordinate efforts in developing a plan to improve the systems of care in Georgia for children with autism and their families. The training received in GaLEND and my experiences coordinating the Autism Plan for Georgia opened doors and prepared me to serve in various leadership roles. I later served as Family Faculty for GaLEND, supporting family trainees.

Since completing the GaLEND program, I have served in several state leadership roles in the MCH program at the Georgia Department of Public Health, including Title V Children and Youth with Special Health Care Needs (CYSHCN) Director, Part C of the Individuals with Disabilities Education Act (IDEA), Director, and Child Health Director. Each position allowed me to lead programs and work with staff who were committed to improving outcomes for CYSHCN and their families. After leaving public health I used my skills, knowledge, and passion to envision and implement a new Family Support unit for Georgia's childcare subsidy program, Children and Parent Services (CAPS). As the Director of Family Support and later the Director of Development and Partnerships, I was able to improve policies and eligibility criteria, which helped remove barriers and increase access to quality childcare for children with disabilities and their families participating in the CAPS program.

Currently, I work in the Division of Services for Children with Special Health Needs at MCHB. I am a project officer and lead the division's efforts for transition, epilepsy, and state-level autism programs. I also support efforts to improve family engagement across MCH and serve as a project officer for several Family-to-Family Health Information Centers (F2F) programs. I take pride in being a project officer and family leader in our division. I appreciate working for an agency that respects, understands the value, and strives to incorporate lived experience in our work.

As a stay-at-home mom for 14 years before returning to the workforce, I have had an amazing career which I could not have planned, if I tried! The GaLEND program helped to expand my knowledge and understanding of the systems of care for individuals with disabilities and their families, strengthened my leadership skills as a parent, family leader, and professional, and provided the tools needed to impact change at the community, state, and federal levels.

# Appendix: Program Descriptions

## Graduate Education Programs to Educate the Next Generation of MCH Leaders

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### Centers of Excellence in MCH

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The Centers of Excellence in MCH in Education, Science, and Practice aim to 1) strengthen and expand the MCH workforce by training graduate and post-graduate public health students in MCH, and 2) advance MCH science, research, practice, and policy through a well-trained MCH public health workforce. These programs are offered within accredited schools of public health.

The Centers of Excellence train public health professionals for leadership roles in MCH by providing exposure to the knowledge and skills needed to be effective. The [MCH Leadership Competencies](#) serve as a guide for this work. The Centers of Excellence programs recruit diverse trainees and engage them in didactic and experiential training in MCH, including placements with MCH organizations and involvement in MCH faculty research activities. The Centers of Excellence also work closely with state Title V programs and community organizations to provide subject matter expertise and strengthen academic-practice partnerships.

MCHB currently funds 13 Centers of Excellence programs at schools of public health in 10 states and the District of Columbia. View the [Centers of Excellence in MCH Education Science and Practice](#) web page or [Centers of Excellence fact sheet \(PDF\)](#) for more information.

### Developmental-Behavioral Pediatrics (DBP)

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The DBP Training Program aims to increase access to evaluation and services for children with a wide range of developmental and behavioral concerns, including autism. The DBP Training Program trains the next generation of leaders in developmental-behavioral pediatrics and builds the workforce's capacity to evaluate, diagnose, or rule out developmental disabilities, including autism and other behavioral health concerns. The program also supports research and clinical care in a broad range of behavioral, psychosocial, and developmental issues that present in primary care pediatric practice.

The DBP Training Program prepares fellows in developmental-behavioral pediatrics for leadership roles as teachers, investigators, and clinicians advancing the field. The program also provides pediatric practitioners, residents, and medical students with essential biopsychosocial knowledge and clinical expertise.

MCHB currently funds 13 programs in 10 states. View the [Developmental Behavioral Pediatrics](#) web page or [DBP fact sheet \(PDF\)](#) for more information.

### Leadership Education in Adolescent Health (LEAH)

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The LEAH program provides interdisciplinary leadership training in adolescent and young adult health for five core disciplines including medicine, nursing, nutrition, psychology, and social work. Graduate and post-graduate training prepares health professionals for leadership roles in public health practice, clinical care, research, education, and organization of health care services by integrating biological, developmental, mental health, social, economic, and environmental issues within a public health framework.



Through training, technical assistance, and continuing education, LEAH programs work to improve family- and youth-centered, community-based care for adolescents and young adults and enhance the capacity of Title V and other MCH programs to improve young people's health.

MCHB currently funds nine LEAH projects in schools of medicine and teaching hospitals in eight states. View the [Leadership Education in Adolescent Health](#) web page or [LEAH act sheet \(PDF\)](#) for more information.

### **Leadership Education in Neurodevelopmental and Other Related Disabilities (LEND)**

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LEND provides interdisciplinary training to enhance the clinical expertise and leadership skills of professionals dedicated to caring for children with neurodevelopmental and other related developmental disabilities (DDs), including autism, across their lifespan. Funded through the Autism CARES Act, LEND programs promote education, early detection, and intervention in autism/DDs. LEND program trainees participate in academic, clinical, leadership, and community opportunities. Trainees also receive training in cultural and linguistic responsiveness using family and person-centered approaches.

LEND programs improve the health of children who have, or are likely to develop, neurodevelopmental or related disabilities by preparing trainees from a wide variety of professional disciplines to assume leadership roles and to ensure high levels of clinical competence. LEND programs also increase awareness of autism/DDs, reduce barriers to screening and diagnosis of autism/DDs, promote evidence-based interventions for individuals with autism/DDs, and train professionals to utilize valid screening tools to diagnose and rule out autism/DDs.

MCHB currently funds 60 LEND programs. View the [Leadership Education in Neurodevelopmental and Other Related Disabilities](#) web page or [LEND fact sheet \(PDF\)](#) for more information.

### **MCH Leadership, Education, and Advancement in Undergraduate Pathways (LEAP)**

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The purpose of the MCH LEAP Training Program is to promote the development of a diverse and representative public health and health care workforce. LEAP programs aim to recruit undergraduate students from underserved or underrepresented backgrounds into MCH public health and MCH-related health professions to improve levels of representation, reduce health disparities, and increase access to health care for vulnerable and underserved MCH populations, including those from racially/ethnically diverse backgrounds.

MCHB currently funds six LEAP programs in five states. View the [MCH Leadership, Education, and Advancement in Undergraduate Pathways](#) web page or [LEAP fact sheet \(PDF\)](#) for more information.

### **MCH Nutrition**

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The MCH Nutrition Training Program provides long-term graduate education and short-term continuing education in MCH nutrition through graduate programs. Students are trained in leadership skills, core public health principles, epidemiology, environmental approaches to population intervention, and the development and evaluation of nutrition-related, cost-effective interventions for specific populations.

Training is provided in identifying and designing outcome evaluations and in evaluating the potential physiological and biochemical mechanisms linking diet and nutritional status with risk or disease status. This training focuses on leadership in pediatric and maternal nutrition and is designed to provide both



clinical and public health approaches to working with the pediatric and maternal populations. Examples of areas of emphasis include specialized neonatal intensive care training, children with special health care needs, breastfeeding promotion and maternal nutrition, adolescent nutrition, and pediatric obesity.

MCHB currently funds seven MCH Nutrition Training Programs in six states. View the [MCH Nutrition Training Program](#) web page or [MCH Nutrition fact sheet \(PDF\)](#) for more information.

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### **MCH Public Health Catalyst Program**

The purpose of the MCH Public Health Catalyst Program is to 1) provide an increased focus on fundamental MCH content and competencies within schools of public health where no concentration currently exists, and 2) provide MCH content exposure to an increased number of public health students, introducing students to careers in the MCH field.

Catalyst programs provide MCH exposure to graduate students, including individuals from underrepresented backgrounds (including racial and ethnic minorities), who are also underrepresented in the MCH field. Catalyst programs achieve this through 1) developing graduate-level courses focus on foundational MCH content; 2) expanding current MCH curricular offerings; and 3) developing graduate-level public health degrees, certificates, or concentrations in MCH.

MCHB currently funds nine Catalyst programs in schools of public health in nine states. View the [MCH Public Health Catalyst Program](#) web page or [Catalyst fact sheet \(PDF\)](#) for more information.

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### **Pediatric Pulmonary Centers (PPCs)**

The PPCs serve as models of excellence in interdisciplinary training, systems integration, and research for core disciplines, including pediatric pulmonary medicine, nursing, nutrition, and social work. PPC programs develop interdisciplinary leaders, at the graduate and post-graduate level, who improve the health status of infants, children, and youth with chronic respiratory and sleep-related conditions.

PPC trainees learn skills needed to support family-centered practice, policies, and research, and increase access to health services through innovative methods, such as telehealth, collaborative systems of care (i.e. medical homes), and distance-learning modalities.

MCHB currently funds six PPCs in five states. View the [MCH Interdisciplinary Education in Pediatric Pulmonary Centers](#) or [PPCs fact sheet \(PDF\)](#) for more information.

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## **Programs for the Practicing MCH Workforce**

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### **Children's Healthy Weight State Capacity Building Program**

The purpose of the Children's Healthy Weight State Capacity Building Program is to develop three state models in MCH nutrition integration, which can then be implemented and replicated in states nationwide. These state models focus on 1) increasing the MCH nutrition competency of the state Title V workforce and 2) optimizing MCH nutrition-related data sources to contribute to data-driven programs and activities related to assessment, policy development, and assurance.

State models aim to increase access to high-quality, evidence-based nutrition services for MCH populations, including all women of childbearing age and their children, using innovative strategies to

build state capacity to integrate nutrition statewide into Title V programs. This program supports states to strengthen, align, and coordinate current nutrition programs, services, and resources to build and expand capacity around MCH nutrition.

View the [Children's Healthy Weight State Capacity Building Program](#) web page for more information.

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### Healthy Tomorrows Partnership for Children

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The Healthy Tomorrows Partnership for Children Program (HTPCP) supports community-based partnerships and collaborations aimed at improving the health status of disadvantaged children, youth, and families nationwide by increasing their access to health services. Programs implement and evaluate innovative, community-based programs and models of care that build on existing community resources. The HTPCP funds programs that incorporate preventive health, communication, education, coordination and integration of care, and access to psychosocial supports into their innovative models of care. In addition, grantees in community practice often support the development of family-centered, culturally competent pediatric clinicians and public health professionals.

The HTPCP funds 40 grants across 22 states and the District of Columbia. View the [Healthy Tomorrows Partnership for Children Program](#) web page and [HTPCP infographic \(PDF\)](#) for more information.

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### MCH Navigator

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The MCH Navigator is a centralized portal for pursuing continuous learning in MCH and is designed to help emerging and established MCH professionals map professional growth pathways. The MCH Navigator links learners to existing open-access training, organized in areas consistent with nationally endorsed public health and MCH leadership competencies. In this way, the MCH Navigator can meet the ongoing training needs of a diverse MCH workforce by providing a one-stop shop for high-quality, relevant training. Key site features include a searchable, web-based resource inventory of free learning opportunities, training spotlights on hot topics in the field of MCH, and a library of learning opportunities to support the implementation of the MCH Block Grant.

For more information, view the [MCH Navigator](#) web page.

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### MCH Workforce Development Center (MCHWDC)

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The MCHWDC serves as a national training hub to support state Title V program leaders and partners to improve their skills and knowledge to meet current public health and MCH policy and program goals. One example of this is preparing the current and future workforce to support the ongoing transformation of the Title V MCH Services Block Grant. The MCHWDC is engaged with key academic, policy, and public health practice partners to build the capacity of MCH leaders and partners in the 59 states and jurisdictions.

A secondary audience for MCHWDC's activities is undergraduate and graduate students who are engaged in MCH training programs. The MCHWDC provides didactic training and internship opportunities for MCH students, building skills in the three focus areas:

- Systems integration
- Change management and adaptive leadership
- Evidence-based decision making

The MCHWDC also supports a Title V Internship Program, which pairs undergraduate and graduate students to undertake health transformation projects identified by state Title V programs. The internships provide students with real-world MCH experience and provide states with the opportunity to both acculturate the future workforce and to benefit from the new knowledge and skills of current trainees.

View the [National MCH Workforce Development Center](#) web page and [MCHWDC fact sheet \(PDF\)](#) for more information.

### **Pediatric Mental Health Care Access (PMHCA) Program**

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The PMHCA Program promotes behavioral health integration into pediatric primary care. Using telehealth, PMHCA programs provide timely detection, assessment, treatment, and referral of children and adolescents with behavioral health conditions, using evidence-based practices and methods such as web-based education and training sessions.

State or regional networks of pediatric mental health teams provide telephone or video consultation, training, technical assistance, and care coordination for pediatric primary care providers to diagnose, treat, and refer children with behavioral health conditions. In Fiscal Year 2022, over 8,880 primary care providers in 50 states, tribes, and territories participated in a statewide or regional PMHCA program.

There are currently 54 funded PMCHA programs. View the [Pediatric Mental Health Care Access Program](#) web page or [PMHCA fact sheet \(PDF\)](#) for more information.

## Text: DMCHWD Contextual Organizational Chart

The [organizational chart \(page 2\)](#) portrays DMCHWD's connection to the U.S. Department of Health and Human Services (HHS) in seven tiers and the various branches within DMCHWD.

The top of the chart is the **President of the United States** as the first tier.

It connects directly to **HHS** as the second tier.

HHS connects directly to **HRSA** as the third tier.

The fourth tier of six boxes connects from HRSA:

- Bureau of Health Workforce
- Bureau of Primary Health Care
- Provider Relief Bureau
- **MCHB**
- HIV/AIDS Bureau
- Health Systems Bureau

The fifth tier of eight boxes connects from MCHB:

- Division of Services for Children with Special Health Needs
- Division of Child, Adolescent, and Family Health
- Division of Healthy Start and Perinatal Services
- **DMCHWD**
- Division of State and Community Health
- Division of Home Visiting and Early Childhood Systems
- Office of Epidemiology and Research
- Office of Policy and Planning

The sixth tier of two boxes connects from DMCHWD:

- Programs for the Practicing MCH Workforce
- **Graduate Education Programs to Educate the Next Generation of MCH Leaders**

The seventh tier of eight boxes connects from the Graduate Education Programs:

- DBP
- LEAH
- LEND
- MCH Public Health Catalyst
- MCH Nutrition
- LEAP
- PPCs
- Centers of Excellence in MCH

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