



# Minnesota Department of Health Maternal and Child Health (MCH)



## SECTION OVERVIEW

The goal of the MCH Section is to provide statewide leadership and public health information essential for promoting, improving or maintaining the health and well-being of women, children and families throughout Minnesota.

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Website: [www.health.state.mn.us/divs/cfh/program/mch/](http://www.health.state.mn.us/divs/cfh/program/mch/)

## Overview

The programs within the MCH Section strive to improve the health status of infants, children and youth, and women and families. The section provides a focal point for influencing the efforts of a broad range of agencies and programs committed to this goal. The role of the section is to: assess the health needs of mothers, children, and their families; use that information to advocate effectively on their behalf in the development of policies concerning organizational and operational issues of health systems; and advocate for programs and funding streams which have the potential to improve their health. The Section provides administrative and technical assistance to community health boards, tribal governments, schools, voluntary organizations, and private health care providers.

## Section Priorities

The following priorities have been identified for the MCH Section:

- Improve birth outcomes.
- Improve the health of children and adolescents.
- Promote optimal mental health.
- Reduce child injury and death.
- Assure quality screening, identification and intervention.
- Improve access to quality health care and needed services.
- Assure healthy youth development.

## Section Support

**Maternal and Child Health Advisory Task Force:** The Task Force was originally created by the Minnesota Legislature in 1982 to advise, consult with and make recommendations to the Commissioner of Health on issues of importance to maternal and child health. It is composed of 15 members who represent professionals with expertise in maternal and child health, local health departments and consumers with interest in the health of mothers and children. The Task Force meets quarterly and has an executive committee and work groups.

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**MCH Data and Epidemiology:** The MCH State Epidemiologist provides overall leadership on MCH data and epidemiology. This includes technical assistance and consultation on the development and implementation of surveys, study design, program evaluation, data collection and analysis, and the review and coordination of state and local data. This staff also mentors and assists new epidemiologists on applying knowledge and skills to public health problems.

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## Programs

### Family Home Visiting Unit

Supervisor: Candace Kragthorpe ([candace.kragthorpe@state.mn.us](mailto:candace.kragthorpe@state.mn.us) or 651-201-4841)

Supervisor: Mary Jo Banken ([maryjo.banken@state.mn.us](mailto:maryjo.banken@state.mn.us) or 651-201-3773)

**Family Home Visiting:** The Family Home Visiting Unit promotes healthy pregnancies and happy, healthy babies, toddlers and preschoolers. Family home visiting has been shown to be an effective service strategy for very young children and their families, improving outcomes in health, safety, school readiness, and economic self-sufficiency. These voluntary, home-based services – ideally delivered prenatally through the early years – connect parents with trained professionals who provide health and caregiving information and support. The goals of the Unit include planning and statewide capacity-building to ensure family home visiting services are an integral component of a comprehensive early childhood system as well as a vital link with state and tribal health care systems, ensuring a continuum of health care and support services to families. The Unit provides administrative oversight for grant funds to Community Health Boards and Tribal governments to support family home visiting services. Staff also provide training, consultation, data collection and analysis, and technical assistance statewide to family home visiting programs administered at the local level, assuring the application of current science and research to a range of home visiting models and practices.

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### Woman and Infant Health Unit

Supervisor: Katie Linde ([Kathryn.M.Linde@state.mn.us](mailto:Kathryn.M.Linde@state.mn.us)) or 651-201-5010

**Women's Health:** The women's health consultant provides consultation, technical assistance and support to partners working to address multiple women's health issues. A women's health interest group has been formed to collaborate on activities across the department. The women's health consultant also coordinates with the student parent grant initiative and staff working with the Birth Defects Information System.

Contact: Cecilia Wachdorf ([Cecilia.Wachdorf@state.mn.us](mailto:Cecilia.Wachdorf@state.mn.us) or 651-201-5395)

**Family Planning:** The Family Planning Special Projects Grant Program provides grants to nonprofit agencies, local health departments, and other governmental agencies to provide family planning services to women and men who have barriers to accessing these services such as poverty, lack of insurance, race, age or culture. MDH staff provides consultation, technical assistance and support for implementation of best practices. This work is done in close collaboration with the MDH HIV/STD staff, the family planning grantees, the MDH Office of Minority and Multicultural Health and the Department of Human Services. State funds also support a family planning and sexually transmitted infection (STI) hotline staffed by individuals trained in information, referral, family planning, and STI counseling. Information on the hotline is mailed annually to Medicaid and Minnesota Care recipients.

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Website: [www.health.state.mn.us/divs/cfh/program/familyplanning/](http://www.health.state.mn.us/divs/cfh/program/familyplanning/)

**Infant Mortality Reduction:** The infant mortality reduction initiative provides resources, education, and technical assistance to local health departments, tribal governments, and community agencies to improve birth outcomes and reduce infant mortality with a particular focus on reducing racial and ethnic disparities in infant mortality and other poor birth outcomes. MDH also supports work to improve the health disparities around infant mortality that exists in the tribal communities in Minnesota. Partners in the program include the Office of Minority and Multicultural Health, the American Indian Community Action Team, the March of Dimes, the Department of Human Services, Twin Cities Healthy Start, Minnesota SID Center, Tribal nursing directors, urban American Indian programs, local health departments, and ACOG Minnesota.

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Website: [www.health.state.mn.us/divs/cfh/program/infantmortality/](http://www.health.state.mn.us/divs/cfh/program/infantmortality/)

**Positive Alternatives Program:** The Positive Alternatives Program provides grants to support services for pregnant women and women parenting infants that promote healthy pregnancies and assist them in developing and maintaining family stability and self-sufficiency. Currently, 31 grantees offer women information on medical care, nutritional services, housing assistance, adoption services, education and employment assistance, including services that support the continuation and completion of high school, child care assistance, and parenting education and support services. Grantees may directly provide these or other needed services, working in collaboration with community resources.

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**Student Parents Support:** MDH recently received federal funding to support a Student Parents Initiative. The goals of the initiative are to assure that pregnant and parenting teens and young women and men accomplish their higher education/post-secondary education goals and that pregnant and parenting young students maintain positive health and well-being for themselves and their children. These goals will be achieved by expanding current services to young parenting students on campus, starting new student parent help centers at higher education institutions, and reaching out to young student parents through technology and media.

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Website: [www.health.state.mn.us/divs/cfh/program/studentparent/](http://www.health.state.mn.us/divs/cfh/program/studentparent/)

**Pregnancy Risk Assessment and Monitoring System (PRAMS):** PRAMS is part of a Centers for Disease Control and Prevention (CDC) initiative to reduce infant mortality and low birth weight. PRAMS is a survey of mothers who have recently had a baby. It includes questions about attitudes and feelings related to pregnancy, prenatal care, and experiences before, during and after pregnancy. Minnesota PRAMS gathers state-specific information that is used to address public health issues and to develop effective programs and policies that will improve the health of mothers and babies.

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## Child and Adolescent Health Unit

Supervisor: Kathy Wick ([kathy.wick@state.mn.us](mailto:kathy.wick@state.mn.us) or 651-201-4064)

**Child Health Consultation/Child & Teen Checkup Program:** This program provides statewide technical assistance and consultation in the areas of adolescent and newborn/child health, especially developmental and socio-emotional screening instruments. The Child and Teen Checkups (C&TC) Program is a Department of Human Services preventative health care program for children under 21 years of age who are enrolled in the Minnesota Medical Assistance program. Staff conduct numerous trainings and workshops statewide for C&TC providers (public and private). Participants are taught skills in well child screenings, such as hearing, vision, developmental and mental health. A contractual arrangement with the Minnesota Department of Human Services matches dollar for dollar of MDH state funds with federal Medicaid funds. MDH staff also provide technical assistance to those who perform early childhood screenings (ECS). ECS is the mandated preschool screening program administered by the Department of Education. MDH staff train on several of the required and optional components of ECS.

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**School Health Consultation:** The school health nurse consultant provides education, consultation, and technical assistance throughout the state to school nurses, school administrators, school boards, teachers, parents, early childhood and child care. In addition to working with numerous MDH staff, the school health nurse consultant partners with the Departments of Education and Human Services and the Minnesota Board of Nursing to share program information and assure quality school health activities.

Contact: Cheryl Smoot ([cheryl.smoot@state.mn.us](mailto:cheryl.smoot@state.mn.us) or 651-201-3631)

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**Child Care Health Consultation:** The child care health consultant promotes the health and safety of children, families and child care providers in early childhood education and out-of-home care settings through consultation, training, information and referral, and technical assistance. This program works collaboratively with staff from the Minnesota Departments of Health, Education (including the Office of Early Learning) and Human Services, others involved in the federal Race to the Top/Early Learning Challenge (RTT/ELC) grant, professional organizations and the Minnesota Board of Nursing. The child care health consultant contributes to the development of high quality child care by sharing expertise and experience relative to health and safety best practices in child care settings.

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Website: [www.health.state.mn.us/divs/cfh/program/childcare/index.cfm](http://www.health.state.mn.us/divs/cfh/program/childcare/index.cfm)

**Adolescent Health:** The adolescent health coordinator provides leadership and support to promote healthy youth development and help meet the health needs of adolescents statewide. This work is done in partnership with the Departments of Education, Human Services and Public Safety and Teenwise Minnesota. Primary activities include consultation, data analysis, capacity-building and support for best practices in adolescent health at the state and local levels.

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**Healthy Youth Development:** MDH received federal funding for Minnesota's Abstinence Education Program. With this grant, Minnesota will implement a primary prevention and positive youth development program targeting a community at high risk for teen pregnancies and births. The community selected for a targeted approach is St. Paul-Ramsey County. Minnesota's program will include a coordinated statewide approach regarding healthy youth development and focus on adolescents 14 and under, reaching them before they start engaging in sexual activity.

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**Personal Responsibility in Education Program (PREP):** PREP will create successful transitions from youth age to adulthood by promoting healthy decisions and providing medically-accurate, evidence-based quality sexual health education to Minnesota teens. PREP will train, support and provide technical assistance to community partners in offering high quality sexuality education to Minnesota's most vulnerable populations. Program goals include: decreasing teen pregnancies among youth 15-19 by implementing high quality medically-accurate and evidence-based programs; decreasing sexually transmitted infections (STIs) among youth 15-19; and increasing healthy behaviors, life skills, and a sense of purpose among participating teens.

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