

1-2014

PUBH 595.51: Issues in Maternal and Child Health

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PUBH 595: Issues in Maternal and Child Health
Spring 2014
3 credit hours

INSTRUCTOR

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Availability: The instructor will be available via email for all students. If you wish to speak with the instructor, the easiest thing to do is to contact her by email and arrange a time to meet. She will make every attempt to reply to your email within twenty-four hours during weekdays. Use e-mail for private communication with the instructors or other students. Put "PUBH595" in the subject line. For additional assistance, contact Tracy Jones at tracy.jones@mso.umt.edu or (406)243-2571.

PROTOCOLS

Format: Online via Moodle. Course procedures and expectations are those normally used in the online MPH program at the University of Montana. For purposes of assignments and class activities, the week starts on Monday 00:01 and ends on Sunday at 24:00, Mountain Standard Time.

Technical Assistance: UOnline has made available an interactive tutorial for using Moodle as a student. UOnline 101 can be found at: <https://umonline.mrooms3.net/course/view.php?id=3927>. Additional Moodle resources can be found at: <http://umonline.umt.edu/Moodle%20Tip%20Sheets/tipsheetandvideosstudents.aspx>.

Accessibility: Students with disabilities may request reasonable modifications by contacting Ms. Stevens. The University of Montana assures equal access to instruction through collaboration between students with disabilities, instructors, and Disability Services for Students (DSS). "Reasonable" means the University permits no fundamental alterations of academic standards or retroactive modifications. For more information, please consult <http://www.umt.edu/disability>.

COURSE

Description: This course provides an overview of maternal and child health problems, programs, and policies. Using the life-course perspective, the course examines the social determinants of health and development of women, infants, children and adolescents. Students will become familiar with the epidemiology of maternal and childhood diseases and assess the resources and interventions used to combat them.

Objectives: At the completion of the course, students will be able to:

1. Describe the historical background and contemporary trends of maternal and child health.
2. Explain the life course perspective and its implications for the practice of maternal and child health.
3. Describe organizations and policies that impact maternal and child health.

4. Analyze the causes and effects of common causes of morbidity and mortality among pregnant women, infants, children, and adolescence.
5. Discuss the biological and sociological factors related to maternal and child health.
6. Discuss the important issues related to women's health.
7. Organize and present information that describes a maternal and child health need and recommendations for meeting the need from the life course perspective.

MPH Program Competencies:

Program Public Health Competencies Addressed in Course:*

1. Prepare Community Data for Public Health Analyses and Assessments
2. Contribute to Public Health Program and Policy Development
3. Communicate in Public Health Settings
4. Practice Public Health with People from Diverse Populations
5. Collaborate with the Community in the Practice of Public Health
6. Base Public Health Practice on Scientific Evidence
7. Participate in Financial Planning and Management of Public Health Units
8. Exercise Public Health Leadership and Systems Thinking
9. Respond to Public Health Issues in Rural Settings
10. Uses Global Insight in Responding to Local Public Health Issues

* For a listing of learning objectives corresponding to each competency see

<http://www.health.umt.edu/schools/pch/documents/Competencies-StudentVersion2012.pdf>

REQUIRED TEXTS

Kotch J. 2012 Maternal and Child Health: Programs, Problems, and Policies in Public Health (3rd Edition) Jones & Bartlett Learning, Burlington, MA.

Other assigned readings will be available online via the Moodle 2 classroom.

COURSE EVALUATION

Weekly reflections- 30%

Participation- 30%

Quizzes- 10%

Final Presentation- 30%

The following grades can be earned by achieving the minimum percentages listed: A = 90%, B = 80%, C = 70%, D =60%.

Weekly Reflections: You will have 14 weekly reflections of the weekly material (weeks 2-15). These papers will be limited to 500 words. Identify a controversy related to the weekly topic. Share your thoughts (informed by the weekly readings, course material, evidence-based resources, and/or experience) about the implications for maternal and child health practice in public health. The reflection is due to the discussion forum by Wednesday 24:00. At the completion of the discussion, add a short paragraph about the discussion (i.e. did your initial thoughts change, was new information presented, was there consensus, etc.). *Note: the discussion summary will not be posted to the discussion forum.* Compile all your reflections into one document, due Monday, May 12 at 24:00 (midnight).

Participation: Participate in weekly discussion forums. During weeks 1 and 16, participate in discussion activities presented by the instructor. Discussions for weeks 2-15 will be based on the weekly reflections. Guest speakers will also facilitate discussions throughout the semester.

Discussion forums based on weekly reflections

Post your weekly reflection to the discussion forum by Wednesday 24:00 and engage in discussion about it. Comment on others' weekly reflections by Sunday 24:00. See Discussion Rubric for grading information. Please note that you are expected to participate throughout the week.

Discussion forums with guest speakers

Review the information presented by the guest speaker. Consider the implications for maternal and child health practice in public health. Post a thoughtful question for the speaker by Wednesday 24:00 and engage in discussion. Respond to any questions posed by the speaker. See Discussion Rubric for grading information. Please note that you are expected to participate throughout the week. **Failure to participate in these discussions will result in zero points for the week.**

Quizzes: Weekly quizzes will cover the reading from the Kotch textbook.

Final Presentation: Create a presentation based on a specific issue related to women's health, pregnancy, infancy, childhood, or adolescence health. Power point, prezi, spicynodes, globster, or other media is encouraged. Apply the life course perspective to your topic. Describe the epidemiology of the issue, social and biological factors, resources and interventions used, and provide recommendations for the most effective maternal and child health practices related to the issue. Email your topic choice to the instructor by Friday, Feb 14 24:00. Presentations are due to the discussion forum by Monday, May 12 at 24:00.

COURSE SCHEDULE

	Topic	Weekly Materials
Week 1 (1/27-2/2)	History of MCH	<p>Required Reading: Chpt 1: Children's Rights and Distributive Justice in MCH Chpt 2: Tracing the Historical Foundations of MCH to Contemporary Times [Selections from] Children's Bureau. (1923-1928) The Promotion of the Welfare and Hygiene of Maternity and Infancy. <i>US Dept of Labor</i>. http://www.mchlibrary.info/history/chbu/21831.html</p> <p>Other: Website Review: MCH Historical Timeline (MCH 101) http://www.mchb.hrsa.gov/timeline/ Webcast: Locating the Future in the Past: A History of MCH Programs in the US, Jeffrey Brosco, MD, Maternal and Child Health Bureau, HRSA http://webcast.hrsa.gov/conferences/mchb/TitleV75/MCH_History.htm Webcast: Title V MCH Programs, Holly Grason, MA, Johns Hopkins Bloomberg School of Public Health http://distance.jhsph.edu/breezeContent/oncampus/MCH/LectureDD/secA/viewer.swf</p>
Week 2 (2/3- 2/9)	The Life Course Perspective	<p>Required Reading: Chpt 4: The Life Course Perspective Halfon, N., Larson, K., Lu M., Tullis, E., Russ, S. (2014) Lifecourse Health Development: Past, Present and Future. <i>Matern Child Health J.</i> 18:344-365 Russ, SA., Larson, K. Tullis, E, Halfon, N. (2014) A Lifecourse Approach to Health Development: Implications for the Maternal and Child Health Research Agenda. <i>Matern Child Health J.</i> 18:497-510</p>

		<p>Hertzman C, Boyce T. (2010) How experience gets under the skin to create gradients in developmental health. <i>Annu Rev Public Health</i>. 31:329-347</p> <p>Other: Webcast: Moving Theory to Practice: Life Course, Social Determinants, and Health Equity Framework. The Maternal and Child Health Life Course Model. Milto Kotelchuck presentation Video, Slides http://webcast.hrsa.gov/conferences/mchb/TitleV75/Theory_to_Practice.htm</p>
Week 3 (2/10-2/16)	Disparities and Equity in MCH	<p>Required Reading: Chpt 10: Disparities in MCH in the United States</p> <p>Braveman, P. (2014) What is Health Equity: And How Does a Life-Course Approach Take Us Further Toward It? <i>Matern Child Health J</i>. 18:366-372</p> <p>Shrimali, B.P., Luginbuhl, J., Malin, C., Flournoy, R., Siegel, A., (2014) The Building Blocks Collaborative: Advancing a Life Course Approach to Health Equity Through Multi-Sector Collaboration. <i>Matern Child Health J</i>. 18:373-379</p> <p>Cheng, T.L. Solomon, B.S., (2014) Translating Life Course Theory to Clinical Practice to Address Health Disparities. <i>Matern Child Health J</i>. 18:389-395</p> <p>Other: TED Talk: Hans Rosling: New Insights on Poverty http://www.ted.com/talks/hans_rosling_reveals_new_insights_on_poverty.html</p>
Week 4 (2/17-2/23)	Families and Health	<p>Required Reading: Chpt 3: Families and Health</p> <p>Allen, D., Feinberg, E., Mitchell, H. (2014) Bringing Life Course Home: A Pilot Reduce Pregnancy Risk Through Housing Access and Family Support. <i>Matern Child Health J</i>. 18: 405-412</p> <p>Park HH. (2006) The Economic Well-Being of Households Headed by a Grandmother as Caregiver. <i>Social Service Review</i>. 80:2: 264</p> <p>Additional Reading: Sung-Chan P, Sung YW, Zhao X, Brownson RC. (2012). Family-based models for childhood-obesity intervention: a systematic review of randomized controlled trials. <i>Obesity Reviews</i>. 14(4):265-78</p> <p>Peacock S, Konrad S, Watson E, Nickel D, Muhajarine. (2013) Effectiveness of home visiting programs on child outcomes: a systematic review. <i>BMC Public Health</i>. 13:17</p> <p>Alio AP, Bond MJ, Padilla YC, Heidelbaugh JJ, Lu M, Parker WJ. (2011) Addressing Policy Barriers to Paternal Involvement During Pregnancy. <i>Maternal Child Health J</i>. 15:425-430</p>
Week 5 (2/24-3/2)	Prenatal Health	<p>Required Reading: Chpt 6: Mothers and Infants</p> <p>Atrash, H.K., Johnson, K., Adams, M., Cordero, J.F., Howse, J. (2006) Preconception Care for Improving Perinatal Outcomes: The Time to Act. <i>Matern Child Health J</i>. 10:S3-S11</p> <p>Shannon, G.D., Alberg, C., Nacul, L, Pashayan, N. (2013) Preconception Healthcare Delivery at a Population Level: Construction of Public Health Models of Preconception Care. <i>Matern Child Health J</i>. DOI 10.1007/s10995-013-1393-8</p> <p>Noonan K, Corman H, Schwartz-Soicher O, Reichman NE. (2013) Effects of Prenatal Care on Child Health at Age 5. <i>Maternal Child Health J</i>. 17:189-99</p> <p>Additional Reading: Hanson JD. (2012) Understanding Prenatal Health Care for American Indian Women in a Northern Plains Tribe. <i>Journal of Transcultural Nursing</i>. 23:29-37</p>

		<p>Baldwin LM., Grossman DC, Murowchick E, Larson EH, Hollow WB, Sugarman JR, Freeman WL, Hart LG. (2009). Trends in perinatal and infant health disparities between rural American Indians and Alaska natives and rural Whites. <i>American Journal of Public Health, 99</i>(4), 638-646.</p> <p>Lu MC, Kotelchuck M, Culhane JF, Hobel CJ, Klerman LV, Thorp JM. (2006) Preconception Care Between Pregnancies: The Content of Internatal Care. <i>Maternal Child Health J. 10</i>:S107-S122</p> <p>Other: TED Talk: Annie Murphy Paul: What we learn before we're born http://www.ted.com/talks/annie_murphy_paul_what_we_learn_before_we_re_born.html?quote=1208</p>
Week 6 (3/3-3/9)	Infant Health	<p>Required Reading: Chpt 6: Mothers and Infants Chpt 14: Issues in Maternal and Child Nutrition: Breastfeeding (pgs. 342-345)</p> <p>Walker M. (2007) Still Selling Out Mothers and Babies: Marketing of Breast Milk Substitutes in the USA. <i>National Alliance for Breastfeeding Advocacy</i>, Weston, MA</p> <p>Shepherd-Banigan M, Bell JF. (2013) Paid Leave Benefits Among a National Sample of Working Mothers with Infants in the United States. <i>Maternal Child Health J. DOI 10.1007/s10995-013-1264-3</i></p> <p>Agnafors S, Sydsjo G, DeKeyser L, Svedin CG. (2013) Symptoms of Depression Postpartum and 12 years Later-Associations to Child Mental Health at 12 years of Age. <i>Maternal Child Health J. 17</i>: 405-14</p> <p>GUEST SPEAKER: Linsey Wiesemann, RN, BSN: Mothers' Milk Bank of Missoula</p>
Week 7 (3/10-3/16)	Child Health	<p>Required Reading: Chpt 7: The Child from One to Four: The Toddler & Preschool Years Chpt 8: The School-aged Child from Five to Nine</p> <p>Additional Reading: Rooney BL, Mathiason MA, Schauburger CW. (2011) Predictors of Obesity in Childhood, Adolescence and Adulthood in a Birth Cohort. <i>Maternal Child Health J. 15</i>:1166-75</p> <p>Toblin RL, Brenner RA, Taneja G, Rossi MW, Collins M, Mickalide AD, Overpeck MD, Clinton-Reid Y, Dever JA, Boyle K, Trumble AC, Scheidt PC. (2011) Preventing Young Children's Injuries: Analysis of Data from Population-Based Surveillance. <i>Maternal Child Health J. 15</i>: S35- S41</p>
Week 8 (3/17-3/23)	Children with Special Needs	<p>Required Reading: Chpt 12: Children with Special Health Care Needs</p> <p>Bethell, C.D., Newacheck, P.W., Fine, A., Strickland, B.B., Antonelli R.C., Wilhelm, C.L., Honberg, L.E., Wells, N. (2014) Optimizing Health and Health Care Systems for Children with Special Health Care Needs Using the Life Course Perspective. <i>Matern Child Health J. 18</i>:467-477</p> <p>Reichman NE, Corman H, Noonan K. (2008) Impact of Child Disability on the Family. <i>Maternal Child Health J. 12</i>:679-683</p> <p>Additional Reading: Fulda KG, Lykens K, Bae S, Singh K. (2009) Factors for Assessing a Medical Home Vary Among CSHCN from Different Levels of Socioeconomic Status. <i>Maternal Child Health J. 13</i>:445-456</p> <p>GUEST SPEAKER: Heather Scharre, MA, BCBA: Families and Autism</p>
Week 9 (3/24- 3/30)	Adolescent Health	<p>Required Reading: Chpt 9: Improving Adolescent Health in the 21st Century</p>

		<p>Sawyer, S.M., Afifi, R.A., Bearinger, L.H., Blakemore, S.J., Dick, B., CEzeh, A., Patton, G.C. (2012) Adolescence: a foundation for future health. <i>Lancet</i>. 379:1630-40</p> <p>Adolescence as a Critical Stage in the MCH Life Course Model: Commentary for the Leadership Education in Adolescent Health (LEAH) Interdisciplinary Training Program Projects. <i>Matern Child Health J</i>. 18:462-466</p> <p>Additional Reading: Division of Adolescent and School Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention (2008) CDC Report on School Policies and Health. <i>J School Health</i>. 78:2</p> <p>Millings A, Buck R, Montgomery A, Spears M, Stallard P. (2012) School connectedness, peer attachment, and self-esteem as predictors of adolescent depression. <i>Journal of Adolescence</i>. 35: 1061-1067</p> <p>Karriker-Jaffe KJ, Foshee VA, Ennett ST, Suchindran. (2012) Associations of Neighborhood and Family Factors with Trajectories of Physical and Social Aggression During Adolescence. <i>J Youth Adolescence</i>. 42:861-877</p> <p>Friend KB, Lipperman-Kreda S, Grube J. (2011) The impact of local US tobacco policies on youth tobacco use: a critical review. <i>Open Journal of Preventative Medicine</i>. 1(2):34-43</p> <p>Other: Website: Adolescent Health, Centers for Disease Control and Prevention http://www.cdc.gov/healthyyouth/adolescenthealth/index.htm</p> <p>GUEST SPEAKER Geno Donney, JD: School to Prison Pipeline</p>
Week 10 (3/31-4/6)	SPRING BREAK	
Week 11 (4/7-4/13)	Women's & Reproductive Health	<p>Required Reading: Chpt 11: Women's Health: A Life Cycle Chpt 5: Family Planning</p> <p>Dehlendorf C, Rodriguez MA, Levy K, Borrero S, Steinauer J. (2010) Disparities in family planning. <i>Am Journ of Obstet Gyn</i>. 202(3): 214-220</p> <p>Frost JJ, Gold RB, Bucek A. (2012) Specialized Family Planning Clinics in the United States: Why Women Choose Them and Their Role in Meeting Women's Health Care Needs. <i>Women's Health Issues</i>. 22-6: e519-e525</p> <p>Additional Reading: Klerman LV. (2006) Family Planning Services: An Essential Component of Preconception Care. <i>Maternal Child Health J</i>. 10:S157-S160</p> <p>Joshi S, Schultz P. (2013) Family Planning and Women's and Children's Health: Long-Term Consequences of an Outreach Program in Matlab, Bangladesh. <i>Demography</i>. 50:149-180</p> <p>Gielen AC, McDonnell KA, Burke JG, O'Campo P. (2000) Women's Lives After a HIV-Positive Diagnosis: Disclosure and Violence. <i>Maternal and Child Health J</i>. 4(2)</p>
Week 12 (4/14-4/20)	Environmental Issues	<p>Required Reading: Chpt 13: Women, Children, and Environmental Health</p> <p>Kramer, M.R., Dunlop, A.L., Hogue, C.J.R. (2014) Measuring Women's Cumulative Neighborhood Deprivation Exposure Using Longitudinally Linked Vital Records: A Method for Life Course MCH Research. <i>Matern Child Health J</i>. 18:478-487</p>

		<p>Additional Reading: Colling JW, Wambach J, David RJ, Rankin KM. (2009) Women`s Lifelong Exposure to Neighborhood Poverty and Low Birth Weight: A Population-Based Study. <i>Maternal Child Health J.</i> 13:326-333</p> <p>McDiarmid MA, Gehle K. (2006) Preconception Brief: Occupational/ Environmental Exposures. <i>Maternal and Child Health J.</i> 10:S123-S128</p> <p>Gruzieva O, Bergstrom A, Hulchiy, O, Kull I, Lind T, Melen E, Moskalenko V, Pershagen G, Bellander T. (2013) Exposure to Air Pollution from Traffic and Childhood Asthma Until 12 Years of Age. <i>Epidemiology.</i> 24(1): 54-61</p>
Week 13 (4/21-4/27)	MCH Nutrition & Oral Health	<p>Chpt 14: Issues in MCH Nutrition Chpt 15: Children`s Oral Health</p> <p>Herman, D.R., Baer, M.T., Adams, E., Cunningham-Sabo, L., Duran, N., Johnson, D.B., Yakes, E. (2014) Life Course Perspective: Evidence for the Role of Nutrition. <i>Matern Child Health J.</i> 18:450-461</p> <p>Thomson WM, Poulton R, Milne BJ, Caspi A, Broughton JR, Ayers KMS. (2004) Socioeconomic inequalities in oral health in childhood and adulthood in a birth cohort. <i>Community Dent Oral Epidemiology.</i> 32:345-53</p> <p>Video: Documentary: A Place at the Table</p> <p>GUEST SPEAKER: Jane Gillette, DDS: Pediatric Oral Health</p>
Week 14 (4/28-5/4)	International Perspectives	<p>Required Reading: Chpt 16: Global MCH Chpt 19: Monitoring and Evaluation for Global MCH Programs</p> <p>Additional Reading: Amibor P. (2013) What will it Take to Maintain the Maternal and Child Health Gains Made in Haiti Prior to the 2010 Earthquake? <i>Maternal and Child Health J.</i> DOI 10.1007/s10995-012-1170-0</p> <p>Moazzeni MS. (2013) Maternal Mortality in the Islamic Republic of Iran: On Track and in Transition. <i>Maternal Child Health J.</i> 17:577-580</p> <p>Video: Birth of a Surgeon, PBS Documentary http://www.pbs.org/wnet/wideangle/episodes/birth-of-a-surgeon/video-full-episode/1795/</p>
Week 15 (5/5-5/11)	Program Planning, Monitoring, and Evaluation	<p>Required Reading: Chpt 17: Research Issues in MCH Chpt 18: Assessment & Program Planning in MCH</p> <p>Fraser MR. (2012) Bringing it All Together: Effective Maternal and Child Health Practice as a Means to Improve Public Health. <i>Maternal and Child Health J.</i> DOI 10.1007/s10995-012-1064-1</p>
Week 16 (5/12-5/18)	Final Presentations	

WARNINGS

Logging In: You must log in every weekday to read current announcements.

Late Work: Late work will not receive points unless there are very serious and verifiable extenuating circumstances and you have contacted the instructor well before the assignment deadline.

Plagiarism: All students must practice academic honesty. Academic misconduct is subject to an academic penalty by the course instructor and/or a disciplinary sanction by the University. All students need to be

familiar with the Student Conduct Code. The Code is available for review online at <http://life.umt.edu/vpsa/documents/Student%20Conduct%20Code%20FULL%20-%20UPDATED%20AUG%2028%202012.pdf>.

Plagiarism is the representing of another's work as one's own. It is a particularly intolerable offense in the academic community and is strictly forbidden. Students who plagiarize may fail the course and may be remanded to Academic Court for possible suspension or expulsion. (See UM Student Conduct Code).

Students must always be very careful to acknowledge any kind of borrowing that is included in their work. This means not only borrowed wording but also ideas. Acknowledgment of whatever is not one's own original work is the proper and honest use of sources. Failure to acknowledge whatever is not one's own original work is plagiarism. (Source: <http://libguides.lib.umt.edu/plagiarism>)

SPCHS Program Policies: See <http://publichealth.health.umt.edu/content/spchs-program-policies>

DISCUSSION RUBRIC

Criteria	Excellent- 100%	Adequate- 70%	Inadequate- 50%	No posting- 0%
Quality and relevance of thinking and analysis.	Response displays an understanding of the specific topic, comments of others and a solid connection with the assigned reading.	Response displays some understanding of the discussion topic or comments by others.	Response displays only a little understanding of the discussion topic or comments by others.	
Degree of participation	Quality posts on multiple days during the week and at least 3 times per week	Responses are vague. All posts within 24 hours, and less than 3 times per week.	Does not interact with other students.	
Quality of writing	Ideas and opinions are expressed in a clear, concise manner and are relevant to the topic. Responses are free of grammatical, spelling, or punctuation errors (Note: You can edit your post for up to 30 minutes after you submit it). The style of writing contributes to open, honest communication.	Responses generally connect to the topic and are usually free of grammatical, spelling, or punctuation errors. The style of writing generally contributes to open, honest communication.	Responses have unclear connection to the topic and/or frequently contain obvious grammatical, spelling or punctuation errors. The style of writing does not contribute to open, honest communication.	
Connection to professional practice	Evidence of strong reflective thought pertaining to personal perspectives and professional development. Reflective statements go beyond what takes place in the classroom to include a theoretical rationale underlying the use of specific information materials. Ideas are supported by evidence-based resources (note: Wikipedia does not count).	Evidence of reflective thought pertaining to personal perspectives and professional development. Reflective statements contain some of the theoretical rationale underlying the use of specific information materials.	Little or no evidence of reflective thought pertaining to personal perspectives and professional development. Few, if any, reflective statements go beyond what takes place in the classroom. Little, if any, theoretical rationale underlying the use of specific information or materials.	