

Title: Support of the National Action Agenda for Building Data Capacity for Maternal and Child Health

Committee for Review: Chronic Disease/Maternal and Child Health/Oral Health

Statement of the Problem:

In 1988 the Institute of Medicine recommended that every health agency “regularly and systematically collect, assemble, analyze, and make available information on the health of the community, including statistics on health status, community health needs, and epidemiologic and other studies of health problems.” (1) Since that time, many state and federal efforts have aimed to build states’ data capacity for maternal and child health. Yet, success has been limited due to a lack of shared vision and communication among public health partners in MCH and the absence of strategic planning to advance capacity building efforts.

Statement of the Desired Action(s):

CSTE endorses the National Action Agenda that proposes to enhance the development of state and local public health agencies' capacity to carryout data-related functions in maternal and child health (MCH). The National Action Agenda seeks to improve data and information systems to influence decision-making at state and local levels, increase opportunities for field-based capacity building, enhance the MCH workforce, improve communication among public health partners in MCH, and develop effective strategies to expand the perspective of the health of women and children.

Fiscal Impact:

Impact:

Supporting the National Action Agenda and participating in further coordinated capacity building efforts have many implications on the health of women and children. Adequate data capacity will impact state and local agencies' ability to perform essential MCH public health services, including 1) addressing and monitoring the health status of women and children; 2) identifying, diagnosing and investigating health hazards that affect women and children; 3) informing and educating the public about MCH issues; 4) mobilizing partnerships to solve MCH problems; 5) proving leadership for setting priorities; and 6) planning interventions and developing policies to assure the health of women and children. In addition, state and local public health agencies will be empowered to evaluate the effectiveness, accessibility and quality of health services to women, infants, children and adolescents, including those with special health care needs. Further, enhanced MCH data capacity will advance the ability of state and local health agencies to practice evidence-based public health, and hence improve government accountability.

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