



**NIHCM
Foundation**

Women's, Children's and Adolescents' Health Update



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NIHCM Foundation Activities

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NIHCM Foundation has released a new brief, [Identifying & Treating Maternal Depression: Strategies & Considerations for Health Plans](#). This issue brief reviews the prevalence of maternal depression, health risks of untreated depression, and economic consequences of depression and its associated health complications. Additionally, the brief provides recommendations and tools for health care providers to identify and treat maternal depression and shares opportunities for health plans to promote a comprehensive approach to early identification and treatment of maternal depression. To access the brief and to view other publications on maternal, child and adolescent health, visit [NIHCM's website](#).

On April 13, 2010, NIHCM hosted a webinar, "[Preventing Prematurity: Opportunities for Health Plans](#)." The webinar convened health plans and leaders in the maternal and child health community who shared innovative programs and explored strategies to reduce preterm birth and the associated costs. Representatives from the March of Dimes, United Healthcare, BlueCross BlueShield of Tennessee and Text4Baby discussed health plan strategies to reduce prematurity. Additional information including the agenda, speaker presentations and audio archive is available [here](#).

NIHCM Foundation, in collaboration with the [Partners in Program Planning for Adolescent Health \(PIPPAH\) initiative](#)\*, is pleased to release a series of print

interviews, [Creating Healthy Opportunities: Conversations with Adolescent Health Experts](#), featuring Shay Bilchik, JD, Georgetown University Public Policy Institute; Jane Brown, PhD, University of North Carolina; Angela Diaz, MD, MPH, Mount Sinai School of Medicine; Abigail English, JD, Center for Adolescent Health & the Law; and Richard Kreipe, MD, Golisano Children's Hospital at Strong. Karen Brown, a public radio reporter and freelance journalist who specializes in health care, conducted the interviews. See [below](#) for an excerpt of the interview with Angela Diaz, MD, MPH, Professor and Vice Chair of the Department of Pediatrics at Mt. Sinai School of Medicine in New York.

\*The interviews were commissioned by the Partners in Program Planning for Adolescent Health (PIPPAH) initiative of the Maternal and Child Health Bureau (MCHB), Health Resources and Services Administration (HRSA). PIPPAH grantees include: the American Academy of Pediatrics, the American Bar Association, the American College of Preventive Medicine, CityMatCH, the Healthy Teen Network, the National Association of County and City Health Officials, the National Conference of State Legislatures, and the National Institute for Health Care Management (NIHCM) Foundation.

### **Supporting Pediatric Mental Health Care & Suicide Prevention**

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The [American Academy of Pediatrics \(AAP\) Task Force on Mental Health](#) has published a series of reports in a special supplement to the [June issue](#) of [Pediatrics](#). The supplement, "[Enhancing Pediatric Mental Health Care: Report from the American Academy of Pediatrics Task Force on Mental Health](#)," outlines strategies to enhance pediatric mental health care at both the community level and primary care setting. The supplement includes new, extensive recommendations that pediatricians should screen children and adolescents for possible mental health problems at every visit. According to the AAP, an estimated 21 percent of children and adolescents in the U.S. meet the diagnostic criteria for a mental health disorder and have evidence of at least minimal impairment. Yet, due to a shortage of pediatric mental health care providers, only 20 percent of these children receive treatment. The supplement aims to help providers fill this gap by reaching out to children who may be facing mental health issues.

The [Teen Suicide Prevention Campaign](#) is a new national public service announcement (PSA) campaign designed to reduce the incidence of suicide and suicide attempts among adolescents. The campaign, launched by the [Substance Abuse and Mental Health Services Administration](#) in collaboration with the [Ad Council](#) and the [Inspire USA Foundation](#), provides support for adolescents who may be contemplating suicide. Topics include warning signs for suicide, depression and eating disorders, as well as relationship advice and coping strategies. The Web site contains videos, audio stories and other interactive features. Each page includes a prominent call-out to the National Suicide Prevention Lifeline, a resource for individuals who are in crisis and need immediate help and support.

Jeffrey A. Bridge et al. examined changes in suicide rates among 10-24-year-olds in the United States from 1992 to 2006. The overall suicide rate and the rate by firearms, poisoning and other methods declined markedly, whereas the hanging/suffocation rate increased significantly from 1992 to 2006. This increase occurred across every major

demographic subgroup, but was most dramatic for females. Read the article, "[Changes in Suicide Rates by Hanging and/or Suffocation and Firearms Among Young Persons Aged 10-24 Years in the United States: 1992-2006](#)," in the [May 2010 edition](#) of the [Journal of Adolescent Health](#).

Health Care Access and Utilization Among Adolescents and Young Adults

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In an [editorial](#) featured in the [Journal of Adolescent Health](#), Charles E. Irwin, Jr., MD reflects that young adults are even worse off than adolescents in terms of access to health care, citing recent research by S. Todd Callahan and William O. Cooper also featured in the same issue titled, "[Changes in Ambulatory Health Care Use During the Transition to Young Adulthood](#)." Callahan and Cooper found that adolescents and young adults had a similar number of health care visits annually; however, young adults were more likely to receive ambulatory care in emergency departments and those visits were less likely to be covered by private health insurance. The authors conclude that there is a need to facilitate a smooth transition in the health care system for adolescents entering adulthood due to changes in ambulatory care use.

As part of the Patient Protection and Affordable Care Act, young adults who previously lost their health insurance coverage following college graduation or are not offered health insurance by their employers will soon be able to stay on their parents' health insurance plans until age 26 due to new health insurance regulations. However, over 65 insurance companies, including all Blue Cross Blue Shield plans, have voluntarily adopted this dependent coverage provision in advance of the September 23, 2010 deadline to avoid interruptions in coverage that could occur for high school and college graduates this summer. For more information about the requirement and to see which plans are instituting early implementation, see the [U.S. Department of Health and Human Services guidance](#) and a [May 2010 Fact Sheet from Families USA](#).

For more information on access to insurance and health care, see the Knowledge Path in the Maternal and Child Health Library: [Health Insurance & Access to Care for Children and Adolescents](#).

### **Addressing Minority Health Issues**

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An article recently published in [Preventive Medicine](#) by J. Nicholas Bodor et al. titled "[Disparities in food access: Does aggregate availability of key foods from other stores offset the relative lack of supermarkets in African-American neighborhoods?](#)" describes the relative lack of access to supermarkets in predominantly African-American neighborhoods. The authors note a particular lack of access to fresh fruits and vegetables, which may contribute to rates of overweight and obesity.

In the [June 2010 issue](#) of the [Journal of Adolescent Health](#), Janet R. Cummings, Ninez A. Ponce and Vickie M. Mays compare racial and ethnic differences in mental health service use among adolescents. While no differences in school-based use of mental health services are noted, significant differences are noted in clinical settings,

indicating that schools may be critical avenues for reducing the unmet need for mental health services among racial/ethnic minorities. Read the article, "[Comparing Racial/Ethnic Differences in Mental Health Service Use Among High-Need Subpopulations Across Clinical and School-Based Settings.](#)"

A recent study of asthma patients in the Military Health System concluded that racial and ethnic disparities in diagnoses and asthma-related emergency department visits exist. Black and Hispanic children were more likely to have an asthma diagnosis and more likely to have an asthma-related emergency department visit than white children. This shows that even with universal health coverage, these disparities persist. Read the article, "[Differences in Prevalence, Treatment, and Outcomes of Asthma Among a Diverse Population of Children With Equal Access to Care,](#)" in the *Archives of Pediatric Adolescent Medicine* published in [June 2010](#).

For more information about racial and ethnic disparities in health, visit the Maternal & Child Health Library's [Knowledge Path on this topic](#).

Understanding Adolescent "Culture" to Promote Health

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Dr. Angela Diaz believes the first step to keeping teenagers healthy is understanding their culture, but not necessarily 'culture' as we usually think about the word.

"There is a culture of adolescence that in my opinion is stronger for adolescents than the race and ethnicity culture," Diaz says. "And if you understand adolescents and how to work with them, it almost doesn't matter, the color of the kid, or the class of the kid."

Diaz runs the Mount Sinai Adolescent Health Center in Lower East Harlem, New York City. Ninety-one percent of her clinic's patients are teenagers of color, most of them Latino or African-American. Diaz says practitioners and policy makers who want to help these kids should start with their developmental stage, not their sociological or racial background.

"I think the health care system in the U.S. was created for adults, by adults. And then we try to fit teenagers into that system, and it really doesn't work for them. And then we call them non-compliant and hard to reach," says Diaz, who is also President of the Board of the Children's Aid Society of New York, as well as a member of the Institute of Medicine. "If you understand the culture of adolescence and the developmental journey, and you work with them on that basis, I think they are the greatest health care consumers."

Mount Sinai caters to teenagers living in poverty because that is the population that needs the most help, Diaz says, and in New York City, poverty is closely correlated with minority status. These factors can often predict whether an adolescent is getting the health care she needs. Diaz says African American teenagers are 40 percent more likely to be uninsured than their white counterparts, and Latinos are 300 percent less

likely to have health insurance than white teenagers. That's where the disparity starts, with alarming consequences for the health and welfare of these populations.

"We are here to help teens, not to mandate, and this is part of adolescent development - to experiment. What we have to do is really create a safe environment around them, whether they try drugs or sex or they try whatever. What we really need to do is help them feel connected to a place where they can always come for help. Even the rare teen who comes with a third-time pregnancy, I will try to prevent the fourth one."

She urges clinics to:

- Stay open during the hours that suit a teenagers' schedule, such as evenings and weekends;
- Hire staff willing to listen closely to adolescents' needs;
- Respect patient confidentiality within the confines of each states' parental notification laws; and
- Involve teenagers in their own care (e.g., asking teenagers what sort of birth control they are most likely to use, as opposed to telling them which type they should use).

But Diaz says individual clinics can only do so much without support from policy makers and legislators. On this topic, she always come back to access - an issue that disproportionately affects young people of color. According to the National Alliance to Advance Adolescent Health, about a quarter of all Latino teenagers and 11 percent of black teenagers are uninsured, compared to only eight percent of white adolescents. And the majority - 72 percent - of uninsured teenagers of color live in low-income households, compared to just 49 percent of the white population.

On a societal level, Diaz would like to see more medical students specialize in adolescent health, and she'd like to see more minorities enter medical fields, both to improve the overall cultural competency of the profession, and to become role models for teenagers of color.

"Whenever there is not enough money, what gets cut is money for social services," Diaz says. "So I'm hoping that the people in charge of the country, the leadership, really take a broader view of what's important."

*Portions of this story have been excerpted from [Creating Healthy Opportunities: Conversations with Adolescent Health Experts](#), by Karen Brown, commissioned by the PIPPAH initiative of the HRSA/MCHB. The views presented are those of the interviewee and do not necessarily represent the views of the MCHB, HRSA or any individual PIPPAH grantee. PIPPAH grantees, 2010.*

## **Health Plan Initiatives and Tools**

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[Text4baby](#), the free mobile information service that provides health tips to pregnant

women and new mothers, currently has 36 Health Plan Outreach Partners, including several Blue Cross plans: Horizon Blue Cross Blue Shield of New Jersey, Blue Cross Blue Shield of Massachusetts, Blue Cross and Blue Shield of Minnesota, Blue Cross Blue Shield of North Carolina, and WellPoint Inc. Read more about the program in a recent [TIME magazine article](#) and contact partners@text4baby.org if you are interested in becoming an Outreach Partner.

[BlueCross BlueShield of South Carolina](#) is tackling childhood overweight and obesity with a new toolkit. The plan's new [Pediatric Healthy Weight Toolkit and Parent Guide](#) was mailed to all 3,400 pediatricians, primary care/family medicine doctors and obstetricians in their statewide networks earlier this year. The toolkit is intended to help physicians identify overweight or obese pediatric patients as well as diagnose and treat those with related conditions. The parent guide is a two-page brochure the physicians can give to parents offering practical information and recommendations for exercise and reducing television time.

[BlueCross BlueShield of Tennessee Foundation](#) is working to prevent infant mortality by funding the "Healthy Babies Healthy Ladies" program at the Chattanooga-Hamilton County Health Department, which teaches women with high-risk pregnancies about prenatal care. Read about this program and associated programs in this [Chattanooga Times Free Press article](#).

AIM, NIIAH and PIPPAH Collaborative Activities

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NIHCM Foundation is part of three collaboratives aimed at improving the Maternal, Child and Adolescent Health: the Alliance for Improving Maternal and Child Health (AIM), the National Initiative to Improve Adolescent Health (NIIAH) and the Partners in Program Planning for Adolescent Health (PIPPAH) Collaborative. These alliances are comprised of national membership organizations representing decision makers within state and local government, maternal, child and adolescent health professions, foundations, the health insurance industry, and business, as well as advocates for families. As part of these efforts, NIHCM Foundation occasionally highlights the publications and activities of the other organizations participating in the collaboratives.

[Grantmakers in Health](#) has released two new issue briefs based on Issue Dialogues held at its fall forum last year: [Where Do We Go From Here? Combating Health Care Disparities in an Era of Reform](#) and [Health and Justice: Health Care for People Involved in the Justice System](#). The briefs highlight strategies and considerations for funders on handling health care disparities and increasing access to care for those emerging from the criminal justice system.

GIH also released a guest commentary by Phillip Gonzalez, Director of Grantmaking at the Blue Cross Blue Shield of Massachusetts Foundation. "[Taking Risks at a Critical Time: Partnering with Government to Improve Health](#)" discusses how foundations can foster constructive relationships between government decision makers, philanthropic organizations and community leaders to improve the health of our communities.

[Healthy Teen Network](#) released, [Healthy People 2020 and Adolescent Health: A Primer](#), which reviews the adolescent and young adult health component of the current [Healthy People 2010 initiative](#). It provides information on the upcoming [HP2020](#) initiative and shares case studies along with tips and resources on how to maximize the use of the adolescent and young adult component of the upcoming HP2020.

The National Center for Education in Maternal and Child Health at Georgetown University has been awarded a 5-year cooperative agreement from the Maternal and Child Health Bureau to continue its [Maternal and Child Health Library \(MCH Library\)](#) services. The library combines research and reference capacity with information technology to provide broad access to information about advances in MCH science and practice. The MCH Library produces the MCH Alert and also houses an extensive collection of over 25,000 items, including a range of multimedia resources. Additionally, the MCH Library has two new knowledge paths available, [Physical Activity and Children and Adolescents](#) and [Health Insurance & Access to Care for Children and Adolescents](#), and recently updated its [Overweight and Obesity in Children and Adolescents](#) knowledge path.

Mark your calendar: On October 20, 2010, HRSA's [Maternal and Child Health Bureau \(MCHB\)](#) will Commemorate the 75th Anniversary of Title V of the Social Security Act. The meeting will be held at the Washington Hilton in Washington, DC. In conjunction with this event, [AMCHP](#) and [CityMatCH](#) will be holding a meeting on Thursday, October 2, titled "Looking to the Future: What are the Opportunities and Challenges of Health Reform for Improving Maternal and Child Health?", and MCHB's Division of Services for Children with Special Health Needs will have a meeting on Friday, October 22, titled "Strategic Planning for CYSHCN: Envisioning 2020." Send an e-mail to [mch75thanniversary@hrsa.gov](mailto:mch75thanniversary@hrsa.gov) for more information.

**Newsletter Feedback**

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NIHCM Foundation is constantly striving to improve our services. Please please take a moment to complete a [brief evaluation form](#). We value your feedback on the Update.

About NIHCM

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The Women's, Children's and Adolescents' Health Update is produced by NIHCM Foundation through funding from the Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services.

The NIHCM Foundation is a non-profit, nonpartisan organization dedicated to improving the effectiveness, efficiency, and quality of America's health care system. The Foundation conducts research, policy analysis and educational activities on a range of health care issues. It fosters dialogue between the private health care industry and the public sector to find workable solutions to health system problems. Information about the Foundation's projects and publications, including our maternal, child and adolescent health initiatives, is detailed on our web site.

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