



NIHCM
FOUNDATION

**National Institute for Health Care Management Foundation
Women's, Children's and Adolescents' Health Update
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NIHCM Foundation Activities

NIHCM Foundation will soon release an issue brief entitled, *Understanding the Uninsured: Targeting Different Policy Solutions for Different Subpopulations*. The study, supported in part by a grant from WellPoint Foundation, takes a closer look at different subpopulations of the uninsured according to program eligibility, income, and demographics, and presents various policy options under consideration for reaching these subgroups. NIHCM researchers found that approximately one fourth of all uninsured persons are eligible for, but not enrolled in, public programs with the vast majority being children and parents who have the most to gain from access efforts. In addition, NIHCM found that childless adults account for 53% of the total uninsured population. The brief will be posted on NIHCM Foundation's website in the spring of 2008.

On March 25, 2008, NIHCM Foundation convened health plan foundation directors and select health plan medical directors for a Roundtable Discussion entitled, *Priorities in Children's Health Access to Health Care Services & Insurance*. **Genevieve Kenney, PhD**, Principal Research Associate, Health Policy Research Center, The Urban Institute, and **Jack Meyer, PhD**, Principal, Health Management Associates, educated participants on the role of public programs in addressing the uninsured and successful community-based initiatives to improve access to care. The afternoon portion of the meeting consisted of a peer-to-peer dialogue about foundations' and health plans' efforts to improve access to health care including best practices and challenges encountered, as well as a discussion of child health funding priorities in general.

NIHCM Foundation will be publishing a paper in the spring of 2008 entitled *Prevention of Adult*

Cardiovascular Disease Among Adolescents: Focusing on Risk Factor Reduction. Authored by Arik Marcell, MD, MPH, Johns Hopkins Bloomberg School of Public Health; Marc Jacobson, MD, FAAP, Schneider Children's Hospital in New York; Jonathan Klein, MD, MPH, University of Rochester Medical Center; and NIHCM staff, this paper will describe the incidence of hyperlipidemia, obesity and overweight, tobacco use among adolescents, and how these factors contribute to early onset of cardiovascular disease. The paper will also outline practical strategies health care professionals, especially health plans, can employ during adolescence to prevent future cardiovascular disease.

Resources, Tools and Programs to Improve Children's Oral Health

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The [MCH Library](#) and the [National Maternal and Child Oral Health Resource Center](#) have released a knowledge path, [Oral Health and Pregnant Women, Infants, Children, and Adolescents](#). This electronic guide provides resources on data, programs, policy and research aimed at improving access and quality of oral health care. The guide is divided into three sections: resources for professionals, resources for consumers and resources on specific aspects of oral health such as dental sealants, early childhood caries, pregnancy and school-based care.

The [American Academy of Pediatrics' \(AAP\) Oral Health Initiative](#) released a free online training entitled [Oral Health Risk Assessment Training for Pediatricians and Other Child Professionals](#). The training provides a general discussion of oral health disease in children but focuses on dental caries in children aged 0-3 years. The course is recognized for Continuing Medical Education Credit and is designed for primary care pediatricians, family physicians, residents in pediatrics or family practice, allied health professionals in a pediatric or family practice office, and health care providers treating children in rural or underserved communities. Visit <http://www.aap.org/commpeps/dochs/oralhealth/cme/> to access the training.

The [American Dental Association Foundation \(ADAF\)](#) announced a [new grant program to educate pediatricians in oral health care](#). The ADAF will provide grants of up to \$100,000 annually for 3 years to fund annual oral health summits where pediatricians will learn to conduct oral health risk assessments, teach families about oral health and prevention, and refer children to a dental home. The grant will also fund an oral health preceptorship program providing pediatricians in underserved areas support to promote oral health for the most vulnerable children.

The January-February 2008 issue of the [American Journal of Maternal-Child Nursing](#) focuses on the [role of nurses in promoting oral health in children, adolescents and women](#). Select topics include: call to action for nurses to improve women's oral health, strategies for nurses to improve children's oral health, risks associated with adolescent oral behaviors, gaps in practice and research on pregnancy and oral health, nursing care for pathological oral conditions, maternal periodontal disease, nurse-dentist collaboration, and infant nutrition and oral health. To access the journal visit: <http://www.mcjournal.com>.

"[Foundations' Role in Improving Oral Health: Nothing to Smile About,](#)" published in the January-February issue of [Health Affairs](#), provides ideas for strategic grantmaking to improve oral health care in America. The authors discuss oral health care financing, challenges, common misperceptions, Foundations' responses, and ways that foundations can make a difference. In addition, the authors state that "new, strategic foundation investments are needed to help states and communities define problems, set priorities, achieve consensus around policy solutions, and implement them."

### **Efforts to Understand and Address Childhood and Adolescent Overweight**

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Researchers at [Johns Hopkins Bloomberg School of Public Health](#) found an [association between](#)

[sleep duration and risk for childhood overweight and obesity](#). A meta-analysis of epidemiological studies revealed that each additional hour of sleep decreased the risk of a child being overweight by 9 percent, and the risk of overweight or obesity was 92 percent higher in children with the shortest sleep duration. The observation was strongly associated with boys but not with girls. The results, which are published in the February 2008 issue of *Obesity*, suggest that adequate sleep might be an important low-cost means for preventing childhood obesity.

New research published in the *Journal of Pediatrics* reports that [nearly one in 10 adolescents may have metabolic syndrome](#). Metabolic syndrome is a cluster of risk factors for heart disease, diabetes and stroke. In adults these factors include fat around the waist, elevated blood pressure, high blood triglyceride levels, unhealthy cholesterol levels and high blood sugar. Since metabolic syndrome has not yet been defined for children and adolescents, researchers measured the number of adolescents who would be diagnosed with the syndrome under four definitions. The prevalence of metabolic syndrome ranged from 2.0 percent to 9.4 percent for all teens, and for obese teens, from 12.4 percent to 44.2 percent. Using the adult definition, researchers found that the metabolic syndrome rate was 25 percent of obese teens and 5.8 percent of all teens. According to the study's lead author, "even if there is no consensus on a pediatric-specific definition, the fact that one in four obese teens meet the adult definition for this clustering of cardiovascular disease risk factors is enough of a concern."

[New York University](#) researchers find that [neighborhood characteristics may directly affect obesity prevalence](#). By analyzing the results of 90 studies, researchers developed a conceptual framework for assessing neighborhood-level determinants of obesity including social influences, access to healthy foods and fitness opportunities, and individual factors such as behavioral intentions. The analysis revealed that obesity rates were higher in neighborhoods with decreased economic and social resources, and that residents of low-income, urban neighborhoods were more likely to report barriers to physical activity and poor access to fresh produce. The authors conclude that such environments present opportunities for public health intervention. The conceptual framework can be used to guide future research on the topic.

In adults weight loss has been linked to a decrease in bone mass - a finding that has caused concern for such interventions in obese children and adolescents. New research published in the February 2008 issue of *Obesity* reports that [bone loss may not be an issue for teens attempting to lose weight](#). Researchers reviewed x-rays of 62 obese adolescents undergoing an intensive year-long weight-loss program. Charting the teens' bone mineral content over the course of the year, they noted that despite losing weight, the teens' bone mass continued to increase and remained higher than that of a comparison groups of thin adolescents. The results show that the health benefits of weight loss in obese teens outweigh any risk to bone development. As such, obese adolescents should continue to pursue medically supervised obesity treatments to control their weight.

Improving Maternal and Child Mental Health

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A new brief, [Reducing Maternal Depression and Its Impact on Young Children: Toward a Responsive Early Childhood Policy Framework](#), describes the impact of maternal depression on young children and the importance of addressing women's mental health issues to ensure that young children enter school ready to succeed. The National Center for Children in Poverty's (NCCP) [Project THRIVE](#) and [Pathways to Early School Success](#) initiatives prepared this brief based on discussions from a meeting on barriers to achievement for young children from families with low incomes. Topics covered include: how depression affects parenting and child outcomes, frequency of depression in combination with other parental risks (e.g. post-traumatic stress disorders), strategies to prevent negative consequences for parents, state and federal policy responses, and recommendations.

The [Office of the Surgeon General](#) released a [workshop report on women's mental health](#). Consumers and experts from health insurance, health care delivery, program planning, academia, advocacy, and policy planning attended the workshop to discuss critical mental health issues affecting girls and women and to make recommendations on materials that the Surgeon General could produce to advance knowledge, understanding and behaviors regarding women's mental health issues. The report summarizes the background and key points of the workshop; provides information on the Surgeon General's women's mental health project and the state of women's mental health; presents a conceptual framework to address women's mental health issues; and includes toolkits for consumers, families and professionals. Specific topics covered include: biological and development factors; special mental disorders; trauma, violence, and abuse; social stress factors and stigma; identification and intervention issues; treatment access and insurance; health system issues; and protective and resilience factors.

The [Centers for Disease Control's \(CDC\) Division of Violence Prevention](#) released a report, [The Effects of Childhood Stress on Health Across the Lifespan](#). The negative impact of prolonged stress on health outcomes is well-known. Childhood stress, in particular, can affect early brain development, compromise the nervous and immune systems, and lead to chronic diseases. This report summarizes existing research on the long-term consequences of childhood stress and provides practitioners with ideas to incorporate this information into their work.



