



# DIVISION OF MATERNAL AND CHILD HEALTH

2020 Needs Assessment

November 6, 2019 – March 20, 2020

Purpose: To gather qualitative community input to inform the 2019/2020 MCH Title V Program Needs Assessment.

Facilitation and research services provided by the Facilitation Center at EKU  
[www.facilitation.eku.edu](http://www.facilitation.eku.edu)

## EXECUTIVE SUMMARY

### Methodology

The Division of Maternal and Child Health partnered with the Facilitation Center at Eastern Kentucky University to conduct a qualitative, statewide Needs Assessment to complement quantitative data collection.

The qualitative collection methods included focus groups and one-on-one telephone interviews. The purpose of these meetings was to identify the beliefs, values, and opinions of key representatives throughout the state in regards to health-related programs, successes or barriers impacting women, infants, children, including those with special health care needs, and adolescents.

Overall, 143 individuals were involved in the study, representing urban and rural areas across Kentucky. Participants included but were not limited to birth and foster parents, faith-based representatives, former and current teachers, Hispanic families, Maternal and Child Health Coordinators, owners/operators of child care centers, physicians, nurses, and various state employees connected to various MCH programs and services.

A total of 125 individuals participated in five focus groups between November 2019 and February 2020 in four different cities: Elizabethtown, Hopkinsville, Lexington, and Somerset. Two sessions were held in Lexington, including one in English and one in Spanish. The majority of participants had a professional connection to MCH; however, the focus group conducted in Spanish consisted primarily of parents and included both mothers and fathers.

A total of 18 telephone interviews were conducted between February 14 and March 20, 2020. These interviews varied from 20-45 minutes. Those interviewed were professionals across Kentucky who have a connection to maternal and child health. They were selected for their knowledge, diverse backgrounds, and points of view related to MCH. They were also carefully selected to ensure statewide geographic representation.

### Successful Maternal and/or Child Health Initiatives

*The following initiatives were identified in both the focus groups and interviews at a higher rate than other topics. The ideas are listed in priority order, based on the frequency of the ideas.*

1. Health Access Nurturing Development Services (HANDS)
2. Safe Sleep Campaign/Cribs for Kids
3. Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
4. Substance Abuse Initiatives
  - Healing, Empowering, and Actively Recovering Together (HEART); KY-Moms MATR (Maternal Assistance Toward Recovery); More substance use treatment options for in-patient, out-patient and community supports; Neonatal Abstinence Syndrome (NAS) registry/initiatives; UK's PATHways program
5. Access to Care Initiatives
  - Community Health Worker Program; Immunizations; Pregnancy/AA Help Center; Specialists outreach to rural areas
6. First Steps

## Critical Problems and Needs by Population

The following matrix presents the most frequently identified problems and needs in both the focus groups and interviews. The numbers indicate the priority order of the ideas, based solely on the number of mentions received. Following the table is a more detailed description of the problems and needs divided by population.

<b>Table A: Most Frequently Mentioned Critical Problems and Needs by Population</b>						
<b>Problems/Needs</b>	<b>Women/ Maternal Health</b>	<b>Perinatal/ Infant Health</b>	<b>Child Health</b>	<b>Adolescent Health</b>	<b>Children with Special Health Care Needs</b>	<b>Cross- Cutting</b>
Access to Care	2	5	2		1	4
Adverse Childhood Experiences						5
Early Interventions		4				
Educating the Community					2	
Education & Awareness	1	1				2
Inclusion & Equity						7
Issues Created by Poverty	4					
Mental Health			1	1		1
Obesity						6
Organized Care					3	
Parental Support					4	
Safe Sleep		2				
Sexual Health				2		
Substance Abuse	3					3
Substance Exposed Newborns		3				
Vaccinations			3			
Vaping				3		

### **Most Frequently Identified Problems/Needs: Women/Maternal Health**

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1. Education & Awareness
  - Parent education on best practices, newborn health healthy pregnancy, vaccine protection and the safest ways to parent; Under-utilization of HANDS and WIC
2. Access to Care
  - Affordable healthcare; Access to prenatal women’s services; Lack of treatment centers/MAT services; Lack of transportation
3. Substance Abuse
4. Issues Created by Poverty
  - Food insecurities: Lack of quality, fresh food; Housing and homelessness; Lack of funds

### **Most Frequently Identified Problems/Needs: Perinatal/Infant Health**

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1. Education & Awareness
  - Parent education on perinatal topics, such as overall health and wellness, development process, attached relationships, and vaccinations
2. Safe Sleep
  - Lack of safe sleep practices and education
3. Substance Exposed Newborns
4. Early Interventions
5. Access to Care
  - Lack of local providers; Better healthcare coverage

### **Most Frequently Identified Problems/Needs: Child Health**

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1. Mental Health
  - Access to behavioral and physical health providers; Helping parents see and address the cause of behavioral issues and needs; Overprescribing of psychiatric medications; Growing problems with anxiety, depression, and general stress in this age group
2. Access to Care
  - Access to health services; Lack of providers; Need for non-traditional hours; Oral health
3. Vaccinations
  - Vaccination hesitancy; Low rates of HPV vaccinations

### **Most Frequently Identified Problems/Needs: Adolescent Health**

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1. Mental Health
  - Increasing suicide rates; Lack of providers; Variety of mental health issues such as anxiety, depression, and stress
2. Sexual Health
  - Teen pregnancy; Access to contraceptives; More information about sexual health
3. Vaping

### **Most Frequently Identified Problems/Needs: Children with Special Health Care Needs**

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1. Access to Care
  - Access to services, care, and support falls off around 17 or 18 years old; Healthcare coverage
2. Educating the Community
  - Lack of qualified child care facilities, developmental activities, social supports, and employment opportunities; Expanded training for teachers, law enforcement and public awareness
3. Organized Care
  - Lack of a medical home or organization of care; Appointment fatigue; Transitions
4. Parental Support
  - Emotional and financial support; Flexible work schedules; Respite care

### **Most Frequently Identified Problems/Needs: Cross-Cutting**

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1. Mental Health
  - Lack of providers; Stigma; Growing number of mental health concerns
2. Education & Awareness
  - Healthy lifestyles; Public health topics; Resources; Stigmas
3. Substance Abuse
4. Access to Care
  - Medical, mental/behavioral health, and substance abuse treatment; Eliminate barriers to receiving care; Healthcare coverage
5. Adverse Childhood Experiences
6. Obesity
7. Inclusion & Equity
  - Bias; Cultural and religious needs/competencies; Discrimination; Healthcare inequality

## Priority Statewide Focus Areas

*Participants were asked to prioritize their list of problems and needs by selecting a limited number of problems/needs that should be an intense, statewide focus for the Division of Maternal and Child Health over the next five years. The highest-ranking issues are listed below in priority order. These were topics raised numerous times, in at least three of the five focus groups and by the greatest number of individual interviewees.*

### 1. PARENT EDUCATION/SKILLS

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AVAILABLE RESOURCES: 1) Lack of participation in HANDS/WIC; 2) Knowledge of existing resources and services

HEALTH AND SAFETY: 1) Vaccine misinformation and hesitancy; 2) Follow up of prenatal care, immunizations, etc. for the children after birth; 3) General safety, such as child birthing, safe perinatal medical care, safe sleep, car seat safety, and social media

PARENTING SKILLS AND RESPONSIBILITIES: 1) Continued education and awareness, when children are young, on how to properly parent and take care of children and understand child development; 2) Help parents see the root cause of behavioral issues and needs

PROPER NUTRITION: Educate families on healthy, proper meals and what is appropriate for them to eat

### 2. ACCESS TO CARE

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AFFORDABLE HEALTHCARE

BEHAVIORAL HEALTH SERVICES: Expanded availability of behavioral health treatment options

MEDICAL SERVICES: 1) Access to health services in schools; 2) General access to medical care, especially in rural communities

PRE-TERM BIRTH PREVENTION: Kentucky has nearly double the national average of pre-term births, and there are many reasons for this – however, access to care is a major issue in the Appalachian area which influences the lack of knowledge, transportation, services, and literacy

SUBSTANCE ABUSE TREATMENT FACILITIES: 1) Access to mental health and substance abuse treatment for moms and kids; 2) Specifically, facilities where you can get in-patient treatment and access to their children, or the children can be with them

TRANSPORTATION

### 3. SUBSTANCE ABUSE

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MATERNAL HEALTH: Appropriate treatment of moms with substance abuse and improving the healthcare system for pregnant women, especially those with Substance Use Disorder (SUD)

INFANTS: Need statewide quality initiatives around the care of opioid exposed newborns and a Plan of Safe Care for substance-exposed and other high-risk newborns

CROSS-CUTTING: 1) Parent and caregiver addiction; 2) Need more prevention and proactive programs; 3) Dealing with the effects of substance abuse, such as keeping families together; 4) Substance use and ethnicity stigmas

#### 4. MENTAL HEALTH

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ADOLESCENTS: 1) Lack of coping skills; 2) Suicide rates; 3) Bullying; 4) Lack of available appointments

CHILDREN: 1) Shortage of providers; 2) Resources are needed, such as interventions, prevention, recognizing signs and symptoms

CROSS-CUTTING: 1) Lack of coping, social, and emotional skills; 2) Great need for behavioral services; 3) Few providers understand trauma and the impact; 4) High turnover of providers; 5) Stigma

#### Statewide Obstacles

*Participants were asked to identify the greatest obstacles the Division of Maternal and Child Health has to overcome in the next five years to improve maternal and child health in Kentucky. The most frequently mentioned obstacles are listed below in priority order. The numbers in parentheses (#) indicate the total number of individuals who shared the same idea.*

1. Lack of Funding (28)
2. Substance Abuse (24)
3. Transportation (13)
4. Parental Support & Engagement (12)
5. Lack of Resources and Infrastructure (11)

#### Statewide Opportunities

*Participants were asked to identify the greatest opportunities the Division of Maternal and Child Health has to overcome in the next five years to improve maternal and child health in Kentucky. The most frequently mentioned opportunities are listed below in priority order. The numbers in parentheses (#) indicate the total number of individuals who shared the same idea.*

1. Additional Funding & Resources (18)
  2. Collaboration (16)
  3. Educational Campaigns (12)
  4. Grassroots Efforts (9)
  5. HANDS (7)
  6. Leverage Technology and the Power of the Internet (7)
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