Resources for Addressing Nutrition
in the Title V Five-Year Needs Assessment

FOR STATE MCH TITLE V PROGRAMS

Title V Needs Assessment Overview

The Health Resources and Services Administration's Maternal and Child Health Bureau (MCHB) funds the Title V Maternal and Child Health (MCH) Block Grant,[1] a federal-state partnership, to support 59 states and jurisdictions (states)[2] to improve the health and well-being of the nation's mothers, children, including children with special health care needs, and their families. The next statewide Five-Year Needs Assessment report is due on July 15, 2020.[3] Report findings serve as the cornerstone for the development of the five-year State Action Plan.

Two of the Title V National Performance Measures (NPMs)[4] (NPM 4: Breastfeeding, NPM 8: Physical Activity) and one National Outcome Measure (NOM)[5] (NOM 20: Obesity) relate to nutrition. According to the Title V Information System, in 2015 the majority of states were tracking at least one of these measures: 49 states were tracking breastfeeding (NPM 4), 24 states were tracking physical activity (NPM 8), and at least five states were addressing obesity (NOM 20).[6] In addition, several states track nutrition-related State Performance Measures (SPMs)[7] and/or use nutrition-related Evidence-based or -Informed Strategy Measures (ESMs)[8] to drive progress in the NPMs. The purpose of this document is to provide information on the role of public health nutrition in Title V programs and ways to engage with public health nutritionists while working on the five-year needs assessment.

Examples of Connections Between MCH Outcomes and Nutrition

- Adherence to a healthy diet and proper nutrition and weight status prior to and during pregnancy may reduce maternal morbidity by decreasing the risk of preeclampsia, pregnancy-induced hypertension, gestational diabetes and resulting large for gestational age infants, and may also reduce the risk of preterm birth.[9, 10, 11, 12]
- Prevention of bullying of overweight children may reduce subsequent excessive weight gain.[13]
- Increased food security may decrease the probability of life-long risks, including weight-related chronic diseases.[14]

Increase Nutrition Capacity, Decrease Disease

Factors such as proper nutrition during pregnancy and access to and education about healthy foods throughout the life course contribute to improved MCH outcomes. Incorporating nutrition in the needs assessment process can lay the groundwork for a five-year action plan that maximizes health promotion and chronic disease prevention. Nutrition-related strategies can impact most NPMs at the ESM level and the document, "Incorporating Nutrition into the Title V MCH Services Block Grant National Performance Measures"[15] outlines ESMs to address all 15 NPMs. In addition, the brief, "Improving the Nutritional Well-Being of Women, Children and Families"[16] offers a primer on MCH nutrition and presents specific recommendations for state agencies on enhancing their public health nutrition services. Public health nutritionists can serve as a resource in the needs assessment process and in the development of state action plans.

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Benefits of Public Health Nutritionists

Public health nutritionists:

- **Ensure nutrition-related programs and services are effective and accelerate progress** on a range of outcomes, including food insecurity, bullying, maternal morbidity and mortality, and birth outcomes.[12, 8, 9]
- **Have the skills and expertise** needed to design, implement, and evaluate upstream food and nutrition programs that prevent adverse health outcomes and promote optimal health across the life course.[9]
- **Work collaboratively across disciplines**, and with other federal and state programs, to bridge communication gaps across existing silos and strengthen the nutrition components in health programs.
- **Use a life course perspective** to emphasize principles for optimal nutrition at the individual, population, and policy levels.
- **Provide evidence-based** technical assistance, professional guidance, and training.
- **Assure or plan interventions** for individuals or groups that have nutrition-related illnesses or special health care needs.

Ways to Engage with Public Health Nutritionists

- **Locate** public health nutritionists in your state by using the Association of State Public Health Nutritionists' MCH Nutrition Council Liaisons[17] directory.
- **Invite** a public health nutritionist in your state to join an upcoming regional call or other gathering of Title V staff.
- **Ask** state public health nutritionists to recommend names of state and community-level nutrition partners, e.g., food banks, Supplemental Nutrition Assistance Program Education [SNAP-Ed], Extension food support/education programs, Supplemental Nutrition Program for Women, Infants and Children [WIC], School Nutrition Programs, and Child and Adult Care Food Programs [CACFP], who can participate in focus groups, provide key informant interviews, and comment on draft action plans.
- **Contact** a state public health nutritionist to learn about the latest nutrition research, emerging issues, and additional ways to use available nutrition data.

Participation of public health nutritionists in the state Title V needs assessment and action plan processes can contribute to a comprehensive and coordinated approach for improving the health of America's mothers, children, and families.

References

Last reviewed on 4-2020

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