





Title V Maternal and Child Health Block Grant Program Needs Assessment

Understanding the Health and Well-Being of Montana Families

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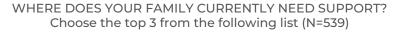
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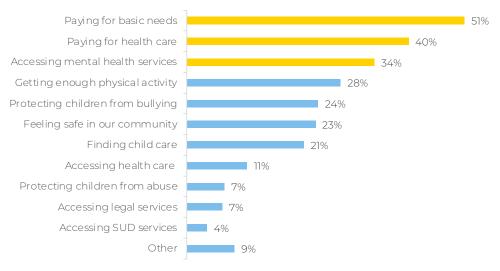
BACKGROUND

The Title V Maternal and Child Health Block Grant (MCHBG) program is a federal-state partnership designed to improve the health and well-being of mothers, infants, children, and adolescents, including those with special health care needs. Every five years, Montana's Title V MCHBG program conducts a statewide needs assessment to gather input from families, public health professionals, and tribal communities about family health and well-being, as well as state and local services. This process helps identify key health challenges and shape services that better support Montana families.

PARENT/GUARDIAN PERSPECTIVES

Over 500 parents/guardians across Montana participated in a survey about their family's health needs. The top support needs they identified included 1) paying for basic needs, 2) paying for health care, and 3) accessing mental health services.





"We live 30 minutes from the closest small town with an ambulance/EMTs. 70 minutes from the nearest hospital. When my 3-month-old child was sick with COVID he had difficulty breathing and I was scared he would have a respiratory emergency. Or that my husband (farmer/rancher) will have a life-threatening emergency and response will be slow."

- Parent/Guardian Survey Respondent.

"Housing -- both cost and availability. Jobs which require too many hours and don't allow for family emergencies. Having to travel over 1.5 hours to purchase fresh food which is affordable and doesn't go bad quickly."

- Parent/Guardian Survey Respondent

PUBLIC HEALTH PROFESSIONALS' PERSPECTIVES

Public health professionals across Montana, at both the local and state levels, shared what's working well, the challenges they face, and where there are opportunities to improve maternal and child health services.

Local-Level Insights: County Public Health Departments (CPHD)

CPHDs are on the frontlines of supporting families across Montana. Through a statewide survey, 68 CPHD staff shared their perspectives on the health needs in their communities for various groups, including mothers, infants, children, and adolescents. They identified priority health areas by selecting the issues they viewed as both most critical and most feasible for CPHDs to address.



Women/Maternal Health

Increase postpartum contraception use.



Perinatal Infant Health

Increase completion of the combined 7-vaccine series.



Child Health

Increase completion of recommended vaccines.



Adolescent Health

Increase HPV vaccination.



Children with Special Health Care Needs

Increase the number of children who have a medical home.



Cross-Cutting Life Course

Increase annual flu vaccination for ages 0-44.

Participants identified both the *strengths* CPHDs bring to serving families and the *areas they need support*.

What CPHDs Do Well	Where CPHDs Need More Support
Connecting families to care: Linking women, children, and youth to health services.	Legal protections: Promoting laws that protect family health.
Informing the public: Sharing health information with families.	Research and innovation: Supporting research or pilot projects.
Building community partnerships: Working with local partners to address health needs.	Data use: Tracking maternal and child health status using public health data.

State-Level Insights: Maternal and Child Health Professionals

Twenty-one interviews were conducted with MCH stakeholders across Montana, including representatives from the state health department and nonprofit organizations, who shared their perspectives on improving maternal and child health services across the state.

WHAT'S WORKING:



Strong Partnerships and Collaboration: Coordination across state agencies, nonprofits, and tribal organizations has improved service delivery and reduced program silos.



Innovative Programs and Data Use: Programs like WIC, the maternal mortality review committee, and opioid response initiatives use data and evidence-based practices to drive impact.



Medicaid Expansion: Extended postpartum coverage and improved access to care have contributed to better maternal and family health outcomes.

KEY BARRIERS:



Funding and Workforce Shortages: Many programs operate with unstable funding and insufficient staffing, especially in rural and underserved areas.



Access and Infrastructure Challenges: Geographic isolation, limited transportation, and systems not designed to meet the needs of rural and frontier communities hinder families' ability to access timely care and services.



Stigma and Mistrust: Stigma around substance use and mental health, particularly for perinatal individuals, impedes access to care.

TOP PRIORITIES FOR IMPACT:



Universal Supports: Expand access to comprehensive support, including universal paid family leave, affordable childcare, and routine maternal mental health screening.



Improved Access and Outreach: Strengthen Medicaid access, invest in rural and tribal health infrastructure, and increase public awareness through public education campaigns and community outreach.



Respectful and Responsive Care: Improve health services by ensuring care is respectful, tailored to individual and community needs, and addresses non-medical factors that influence health.

MONTANA INDIGENOUS COMMUNITIES COMPONENT

To better understand the health needs of American Indian families in Montana, a tribal parent/guardian survey was conducted as part of the needs assessment. Families attending powwows across the state were invited to participate in the survey and share their family's health needs and experiences accessing care at CPHDs.

The following powwows were attended for data collection:

- Montana State University Powwow Bozeman
- Montana State University-Billings Powwow Billings
- Sweetgrass Society Powwow Havre
- Kyiyo Pow Wow Missoula
- Northern Cheyenne Chief's Powwow Lame Deer
- Rocky Boy's Powwow Box Elder
- Crow Fair Crow Agency
- Little Shell Powwow Great Falls

The tribal parent/guardian survey included 70 participants. The responses revealed several key themes that highlight both challenges and opportunities for improving health outcomes in tribal communities:

- Culturally Respectful Care: Many parents and guardians reported negative health care experiences due to a lack of cultural understanding and respect.
- Challenges to Accessing Care: Families reported difficulties getting care because of transportation barriers, a shortage of providers, and underfunded programs.
- Behavioral Health and Addiction Treatment: Although recognized as vital to family and community well-being, families described these services as difficult to find, unaffordable, and lacking cultural appropriateness.
- Strength in Culture: Families emphasized that staying connected to culture and spirituality is essential to the health and well-being of Indigenous communities.

"One of the hardest parts about trying to get good services in this state is trying to make sure our children see people who look like them and understand our culture."

- Tribal Parent/Guardian Survey Respondent

CONCLUSION

By engaging parents and guardians, public health professionals, and tribal communities, the Montana Title V MCHBG program conducted a comprehensive needs assessment to identify priority areas for the coming years. These findings will guide Montana's Title V MCHBG program in setting priorities and improving services for families statewide.

For more information on the Title V MCHBG Program or to request the full report, contact Alison Mutz Alison.Mutz@mt.gov

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