

All children begin life healthy.

Vaccine preventable diseases are eliminated.

Children and youth engage in good health practices.

Adolescents are sexually responsible.

Children and youth are physically healthy.

Children and youth are mentally well.

STRATEGIES

Use systematic surveillance of fetal and infant deaths to establish ongoing prevention strategies.

Increase the number of breastfed infants, especially African-American infants.

Increase the number of reproductive aged women who receive preconception and inter-conception care.

Provide a home visit to all postpartum women.

Incentive-based program to encourage pre & post natal care & education.

Public awareness program.

Identify populations with low immunization coverage rates.

Educate anti-vaccine activists about the importance of immunization.

Assess the immunization needs of immigrant and refugee populations.

Systematically implement physical exams for children in grades 3,5,7, and 9 to introduce vaccines for older children.

Improving access to vaccines (weekend/evening hours, transportation, assure medical home).

Mandate vaccine updates for school attendance.

Provide nutritious food options and nutrition education for all children. Improve the health status and practices of school faculty and staff.

Provide coordinated school health education.

Use Community Centers, schools and playgrounds.

Increase physical activity of all children.

Implement Public Health Department reproductive education programs that encourage sexual responsibility among adolescents.

Improve the healthy lifestyle behavior of pregnant and parenting teens.

Provide evidence-based reproductive information and resources to teens in targeted high-risk neighborhoods.

Youth engagement strategies that build resiliency, self-esteem connect with adult.

Provide support, counseling, etc to victims of sexual abuse.

Engage & educate parents to relate & discuss with their children.

Provide Early & Periodic Screening Diagnosis & Treatment (EPSDT) to high school age students.

Provide adequate primary care services to all children.

Provide adequate specialty care services to all children as needed.

Provide adequate oral care services to all children as needed.

Incentive Pay/Adequate pay, exposure, funding.

Mobilize advocacy & lobbying efforts to effect changes regarding insurance.

Provide services in both traditional & non-traditional venues & non-traditional hours.

Promote awareness and provide a full range of mental health and substance abuse services along the continuum of care.

Provide mental health and substance abuse screening to all children and youth.

Implement a treatment matching approach for children and youth who need service.

Align public policy to support access to mental health services.

Use of therapeutic mentor in variety of environments including home and others.

Mental health consultation to schools.

NEEDS

Better education and utilization of prenatal care.

Education on breastfeeding, especially for African Americans.

Postpartum and inter pregnancy care.

Access & advocacy for service & information.

Education on brain development & typical development of children for caregivers.

Education on the importance of immunization and related risks.

Better access for all populations to immunizations.

Better means of identifying risks of vaccine-preventable disease in older children.

Improved access to nutritious foods.

Education about the effects of high-calorie, high-fat diets.

More adult role models and champions.

Stronger promotion of physical activity during and after school.

Pertinent, factual sex education for children at younger ages.

Guidance for parents about how to talk to their children about sex.

Improved access to information about sexual responsibility for teenagers.

Improved access to programs that reduce the incidence of teenage pregnancy and encourage sexual health.

Resiliency for youth.

Parenting Education for teen parents.

More information regarding the impact of CSA e.g., early sexual activity/ perpetration.

Better insurance to cover care for children and youth.

Better access to care for children and youth living in less affluent neighborhoods.

More effective language translation services and English language classes for ELLs.

Flexible hours and days (i.e. nights and weekends) for neighborhood health service clinics.

Earlier identification of physical health risks for children and youth.

More healthcare professionals willing to serve the underserved; Nationwide shortage.

Improved access to early identification of mental illness.

Better education to families about effectively treating and coping with mental illness.

School and community-based education on prevention of substance abuse and mental illness among children.

Increased access to intervention and treatment.

Better understanding that mental health & physical health are equally integral to children's overall well-being.

Earlier identification of families' behavior that places children and adolescents at risk for future health problems.

A more culturally competent system of mental healthcare.