The purpose of the MCH-MRN is to provide a sustainable, multidisciplinary platform to inspire, support, coordinate, and advance efforts related to MCH measurement, measurement innovation, and shared accountability to improve outcomes and systems performance on behalf of the nation’s children, youth, and families.

**COMMON FRAMEWORK**

The MCH-MRN framework defines a shared vision for the landscape of MCH measures needed for monitoring, research, evaluation, improvement, and accountability. The framework offers a sustainable platform to inspire, support, and coordinate MCH measurement efforts.

Visit the project website at: [http://childhealthdata.org/browse/mchmeasurement/MRN-project](http://childhealthdata.org/browse/mchmeasurement/MRN-project)

**APPLIED NETWORK**

The growing Network currently engages more than 200 individuals whose work represents the MCH lifespan and who are active in the measurement of health and well-being of MCH populations.

Network participants engage at three levels:

1. MCH-MRN Members who receive regular communication regarding Network developments, webinars, and measurement resources.
2. MCH-MRN Field Builders who are engaged as members and in addition agree to raise awareness about the Network and share more information about their work related to strategic agenda priorities.
3. Technical Working Group (TWG) Members who are leaders advancing MCH measurement by building consensus, strategies, and projects in MCH-MRN priority areas.

**STRATEGIC AGENDA**

The MCH-MRN, through its strategic agenda, aims to: a) advance shared accountability in MCH measurement within and across programs and systems, and b) support an era of innovation in MCH measurement to advance the health and well-being of our nation’s mothers, children, and families.

The strategic agenda is designed to leverage existing opportunities, address key measurement gaps, guide the development and alignment of measures, and ensure effective measurement in research, practice, and policy.

Stakeholder input — from practice, program, policy, and family perspectives — informs the strategic agenda. Network members and other experts provide ongoing input and guide strategic agenda development.

The MCH-MRN and its agenda build upon existing measurement sets, surveillance approaches, conceptual frameworks, programs, and initiatives. For example, this includes the Robert Wood Johnson Foundation Culture of Health, the MCH Life Course framework, and other frameworks for child and population well-being.

**ACTIONABLE RESOURCES**

A variety of actionable measurement resources are coordinated by the Child and Adolescent Health Measurement Initiative ([http://www.cahmi.org/](http://www.cahmi.org/)), including interactive data websites, documents, and data tools:

- Data Resource Center for Child and Adolescent Health MCH Measurement portal ([http://www.childhealthdata.org/browse/mchmeasurement/](http://www.childhealthdata.org/browse/mchmeasurement/)). You can read quick summaries of the measure sets used by national programs, and learn how measures are developed, validated, and endorsed.
- MCH Measurement Compendium ([http://childhealthdata.org/browse/mchmeasurement/compendium/](http://childhealthdata.org/browse/mchmeasurement/compendium/)). Here you can browse and conduct interactive searches of more than 800 measures relating to maternal, child, adolescent, and family health from 11 different measure sets.

**TECHNICAL WORKING GROUPS (TWGs)**

Technical Working Groups (TWGs) are the key “operational arms” of the MCH-MRN, designed specifically to advance MCH measurement and help to fill gaps. A key aim of the TWGs is to develop new measurement concepts, measures, tools, and use cases.

TWG activities include: convening leaders for discussions, recruiting and engaging members, publishing papers, applying for project funds, and making actionable recommendations for the MCH-MRN Strategic Agenda.

**INNOVATION TO FILL GAPS**

The MCH-MRN seeks to identify innovations, address gaps in measurement, and translate measurement findings into action and improved health. This includes gaps in the availability of important measures of positive health, rather than just the absence of illness and injury.

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