

# family health

## local health officer



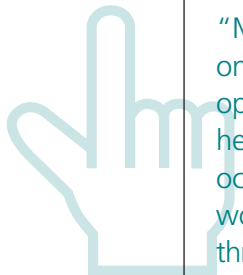
### Local Health Officer Checkpoint

Are you innovative in designing programs?

Are you sensitive to the needs of women and children?

Would you enjoy the opportunity to follow a family across generations?

*If so, read on*



### A TRUE TALE

Fernando Guerra, MD, MPH, had just started his residency in pediatrics when he was asked to serve in a unit deployed to Vietnam. “I was a partially trained pediatrician, but overnight I became a surgeon for a combat aviation battalion responsible for organizing the medical support for the air mobile units.” Because a considerable part of the U.S. involvement in Vietnam was with the civilian population in villages, Dr. Guerra saw far-advanced cases of plague, tuberculosis, leprosy, hepatitis and many unusual and exotic conditions that, he says, were caused in large part by lack of sanitation and the intense poverty of a country at war. He was also called upon to deliver a number of Vietnamese babies.



Fernando A. Guerra, MD, MPH

His war experience sparked Dr. Guerra’s desire to become involved in public health at some point in his career. After his return to the U.S., he completed his pediatric residency and joined the faculty at the University of Texas Medical School in San Antonio. There, he started seeing cases of diphtheria in children. Driven by his concern for underserved communities, Dr. Guerra left academic medicine to go into private practice and established a community and migrant health center in the same underserved area where diphtheria was clustering. The outbreak subsequently turned into an epidemic and, over the course of eighteen months, 161 cases were reported.<sup>1</sup> His commitment deepening, Dr. Guerra realized that if he wanted to pursue a career in public

“Maternal and child health is one of the most important opportunities open to public health practitioners. In this occupation, one can follow women from childhood through their adolescent, young adult and childbearing years.”

health, additional credentials would be useful. After practicing for almost fifteen years, he applied for and received a Kellogg Fellowship to the Harvard School of Public Health.

A few years after completing his MPH, Dr. Guerra was unexpectedly asked to serve as interim health director for the city of San Antonio. His immediate task was to guide the

health department, the city and the Catholic Archdiocese through an upcoming papal visit. The Pope's visit would attract approximately 500,000 visitors, and many public health considerations needed to be addressed in the short weeks remaining. This was Dr. Guerra's introduction to the practice of public health.

After the papal visit, Dr. Guerra was invited to stay on as director, which he agreed to do only if he could also continue to work as a part-time pediatrician. At the end of his day as Director of the San Antonio Metropolitan Health District, he crosses the street to his pediatric clinic.

### Profiling the job

The field of Maternal and Child Health (MCH) "is one of the most important opportunities open to public health practitioners," Dr. Guerra says. "The specialty encompasses the health and well-being of mothers and their infants throughout their developmental stages and over an entire lifespan." Because family structures are intergenerational, important health considerations play out differently within the same household.

MCH is open, but not limited, to participation by physicians, physician assistants, public health nurses, epidemiologists and pharmacists, as well as to those who have earned a general MPH. The personnel needs of MCH range from such highly specialized areas as perinatology and epidemiology to staffing in the most general of all functions, administration. While public health administrators may not be involved in direct patient care, they perform organizing functions essential to MCH programs. Policymakers who allocate resources are especially critical to departments of public health and MCH programs. Family planning, women's health, prenatal services and management of high-risk pregnancy and infertility offer other MCH opportunities. Dr. Guerra suggests that MCH professionals who want to work in the data analysis divisions of public health departments also have credentials in public health.

### Programming

Opportunities to design and execute programs that contribute to the health of women and infants at risk are among MCH's most rewarding tasks. "MCH professionals might design a program that helps pregnant women who suffer from the complications of breast cancer, chronic hypertension or ectopic pregnancy deliver a healthy infant. Multiplying such experiences across a community is the essence of public maternal and child health.



**Did you know?**  
According to the U.S. Census Bureau's year 2000 statistics, over 23 million children under age six live below the poverty level.<sup>2</sup>



When I joined this department, our infant mortality rate was about 9.2 deaths per thousand births. At the end of last year it was 4.9 per thousand. Many factors contributed to this drop, and good public health practice and our maternal and child health programs were undoubtedly among them.”

Practitioners of MCH, to be successful, must employ a multidisciplinary approach to understand and alleviate the problems associated with maternal risk-taking behaviors and lack of access to care. Nurses, health educators, pharmacists, physicians, social workers, epidemiologists and other public health practitioners must work together to create programs to improve access and change behaviors. The nearly halved infant mortality rate within Dr. Guerra’s jurisdiction required just such effective multidisciplinary cooperation.

The specialist in MCH is cross-trained to deal not only with women’s issues but with children and families as well. At the San Antonio Metropolitan Health Department (SAMHD), two significant programs currently offered are “Healthy Mothers-Healthy Families” and “Healthy Start.” Healthy Mothers-Healthy Families aids mothers 21 years of age and younger with three or more children. With the assistance of a Public Health Nurse Case Manager, mothers are taught to create a healthy lifestyle for themselves and their children and to postpone close-interval pregnancies. Healthy Start is a federally funded program designed to decrease infant mortality by bringing high-risk pregnant mothers into the system early and providing prenatal care, case management, education and referral to community resources.

A substantial part of Dr. Guerra’s work is attracting support from outside sources to expand programs and services. For example, winning approval of four years of funding for the Healthy Start Initiative will allow the department to add personnel to work in communities at high risk for infant mortality. Even in difficult circumstances, mortality rates can be lowered if a health department builds community coalitions, develops political support and obtains crucial financial support. “We have learned the importance of dealing proactively with high-risk cases and the benefit of improved access to prenatal services,” says Dr. Guerra.

### **A day in the life**

A day in the life of an MCH specialist in a city health department varies with training and background. In general, though, the practitioner can expect to spend the day seeing clients at prenatal and well-child clinics, teaching classes

in topics such as diet, family planning and stress management, making home visits, or providing individual and group counseling. “MCH makes for a long day, since many of our services must be offered evenings and weekends to accommodate working women with families,” says Dr. Guerra. “But the work is never boring.”

Dr. Guerra’s responsibilities include administrative work, planning, program development, public relations and frequent lectures. “When you’re in a community leadership position,” he says, “you have an opportunity to promote immunization programs, flu vaccination campaigns, adolescent pregnancy prevention, adult health screening and other important public health priorities that touch large groups of people.”

As a public official with authority throughout the city of San Antonio, Dr. Guerra continually interacts with the mayor and city council, the county judge and the commissioner’s court. His actions have an impact not only on the 1.4 million people living in the greater San Antonio area, but on the area’s significant military presence as well as several million visitors a year.



*“Opportunities to design and run programs that make important health contributions to women and infants at risk are among MCH’s greatest rewards.”*

Fernando Guerra, MD, MPH

## career at a glance



### Fernando A. Guerra, MD, MPH

2001–Present	<b>Adjunct Professor</b>	Public Health, Air Force School of Aerospace Medicine
1992–Present	<b>Clinical Professor</b>	University of Texas Health Science Center, Department of Pediatrics
1987–Present	<b>Director of Health</b>	San Antonio Metropolitan Health District, University of Texas Health Science Center, Department of Pediatrics
1971–Present	<b>Pediatric Practitioner</b>	
1980–1992	<b>Clinical Associate Professor</b>	University of Texas Health Science Center, Department of Pediatrics
1969–1971	<b>Chief Resident and Instructor</b>	University of Texas Health Science Center
1967–1969	<b>Pediatric Resident</b>	University of Texas Medical Branch, Galveston
1965–1967	<b>Flight Surgeon</b>	United States Army Medical Corps
1965–1967	<b>Dispensary Physician</b>	United States Army Medical Corps

1 Personal communication, Dr. Fernando Guerra, 12/5/01

2 <http://www.census.gov/hhes/poverty/poverty00/table5.html>