Healthy Start Initiative: Eliminating Disparities in Perinatal Health (Healthy Start)

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Vision: Healthy Communities, Healthy People
History of Healthy Start

• Healthy Start was first established as a presidential initiative in 1991

• In 1991, 15 urban and rural sites in communities with infant mortality rates that were 1.5-2.5 times the national average were funded

• Goal: to identify and develop community-based systems approaches to reducing infant mortality by 50% over the five-year period
By 2019, after multiple rounds of funding HS has 101 projects

Since Inception:
- Focus on special projects (adolescent health, health education)
- Eliminating disparities in Perinatal health
- Scope evolved
- 4 pillar approach

Funding: $125 Million (~ $980,000 per award)

**Project Period: April 1, 2019- March 31, 2024**
101 Healthy Start sites located in 35 states, the District of Columbia, and Puerto Rico
Healthy Start Overview

**WHAT**
Healthy Start is a federally funded, community driven program dedicated to reducing disparities in maternal and infant Health.

**REACH**
As of 2021, HRSA awarded over $100 million to 101 Healthy Start Award Recipients in 35 states, the District of Columbia, and Puerto Rico.

**PURPOSE**
Improve health outcomes before, during and after pregnancy, and reduce racial/ethnic differences and rates of infant death and adverse perinatal outcomes.

**WHERE**
Healthy Start works in communities with infant mortality rates at least 1.5 times the national average, and high rates of low birth weight, preterm birth, and maternal mortality.
Healthy Start Program Model
Current Healthy Start Core Elements

01 IMPROVE WOMEN’S HEALTH
Access to health insurance & health care, preventative services & health promotion

02 IMPROVE FAMILY HEALTH & WELLNESS
Comprehensive screenings, parent education, case management, behavioral health support, father/partner involvement

03 PROMOTE SYSTEMS CHANGE
Community action network; collaboration with local, state, regional, and national government

04 ASSURE IMPACT & EFFECTIVENESS
Data collection & evaluation, performance measure, and quality improvement measures
Who We Serve

Birthing People
- Preconception (before pregnancy)
- Pregnancy
- Postpartum (after pregnancy)
- Interconception (between pregnancies)

Infants & Children
- Infants (up to 18 months)
- Children

Fathers, Partners & Family
- Fathers / Partners
- Family
Current Healthy Start Program Services

- Home visiting (in-person & virtual)
- Health insurance enrollment assistance
- Care coordination
- Health education
- Parenting education
- Family planning
- Father/Partner engagement
- Doula support
- Breastfeeding support
- Nutrition counseling
- Childbirth education
- Transportation service
- Behavioral Health Screenings
Community Action Network

Every Healthy Start project has a **Community Action Network (CAN)** in which awardees partner with local communities and address:

- Fragmented service delivery
- Creating culturally and linguistically appropriate services
- Improving the quality of, and access to, health care and other supports
TA and Support Center (EPIC)

- Provides training and capacity-building assistance
- Supports grantees
- Conducts a variety of activities
Funding to Address Maternal Mortality and Severe Maternal Morbidity (Clinician Funding)

- **Purpose:** To support the hiring of clinical service providers
- **Funding:** $15 Million (~ $164,000 per award)
Healthy Start
Community-Based Doula Supplements

- **Purpose:** To increase the availability of doula services in Healthy Start service areas
- **Funding:** $3.125 Million
- 44 Healthy Start grantees
Infant Health Equity Action Plans

• **Purpose:** To address the social and structural determinants of health that impact infant mortality (IM) disparities in HS communities.

• **Funding:** $1.6 Million

• Health Start grantees
Listening Sessions

- HHS Roundtable with Community-Based Doula Organizations
- Strategic Convenings for MCH Alignment & Impact Towards Infant Health Equity
- Grantee Listening Session
Listening Sessions –
Key Themes by Program Area

HHS Roundtable with Community-Based Doula Organizations

- Include mentorship in doula trainings
- Fund doula trainees and mentors
- Strengthen administrative support for doula programs
- Offer tiered doula training & certification requirements
- Fund models that support both doulas and midwives
Growing and Strategic Covenings for MCH Alignment & Impact towards Infant Health Equity:

- Community Engagement
- Workforce Development
- Strengthen Community Relationships
- Look beyond a clinical perspective
- Tie program requirements to funding
Listening Sessions – Key Themes

Grantee Listening Session

- Funding: Behavior Health, Men’s Health
- Data: Benchmark Changes
- Required participant counts
- Eligibility
- Fatherhood/Partner Engagement
- Workforce Development
- Local Evaluation
Questions for Consideration

Advancing MCH resources across all communities with a focus on health equity

• What components of community engagement are important in helping to address Social Determinants of Health?

• What specific community engagement activities/strategies should be funded?

• What strategies, policies, and/or practices should MCHB continue using in its efforts to diversify the MCH workforce in community and clinical settings?
Additional Information

Healthy Start information:

- “Healthy Start is" Video
- Healthy Start Infographic

How to Find a Healthy Start Project:

- Healthy Start Grantees
Questions

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