

An Overview of Healthy Start

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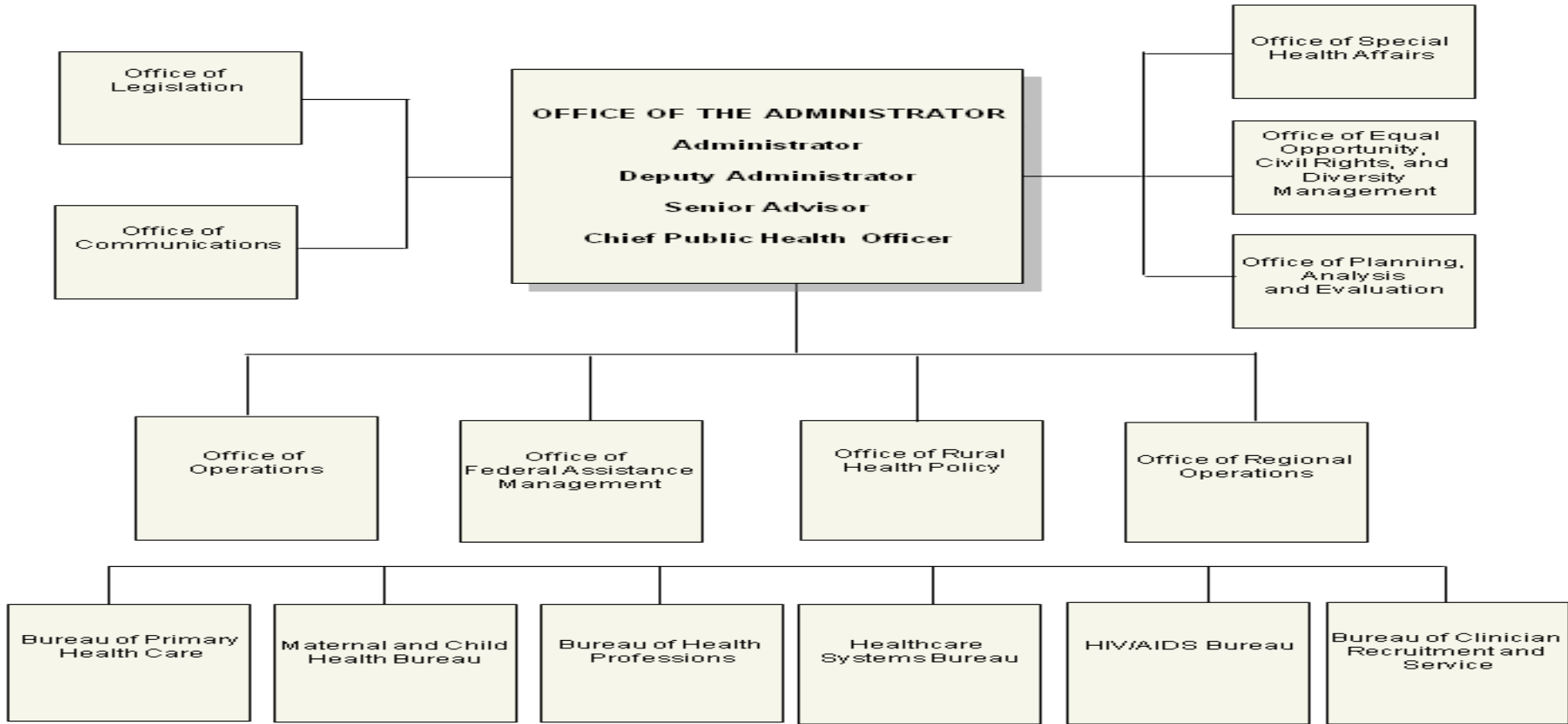
Dept. of Health and Human Services (HHS)
Health Resources and Services Administration (HRSA)
Maternal and Child Health Bureau (MCHB)
Division of Healthy Start and Perinatal Services (DHSPS)



Presentation to SACIM – July 2012



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Maternal and Child Health Bureau

2/24/2012

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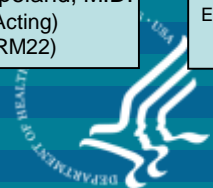
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The MCH Block Grant (Title V) States' Program 501(a)(1)(a-d)

- “Title V authorizes appropriations to states to improve the health of **all** mothers and children”
- “To provide and assure mothers and children... access to quality maternal and child health services”
- “To reduce infant mortality...preventable diseases and handicapping conditions among children... and increase number of...immunized children...”



The MCH Block Grant (Title V) States' Program 501(a)(1)(a-d)

- “To increase [the number of] low income children receiving health assessments and...diagnosis and treatment services”
- “Promote health...by providing prenatal, delivery, and postpartum care...”
- “Promote health of children by providing preventive and primary care services...”



Healthy Start



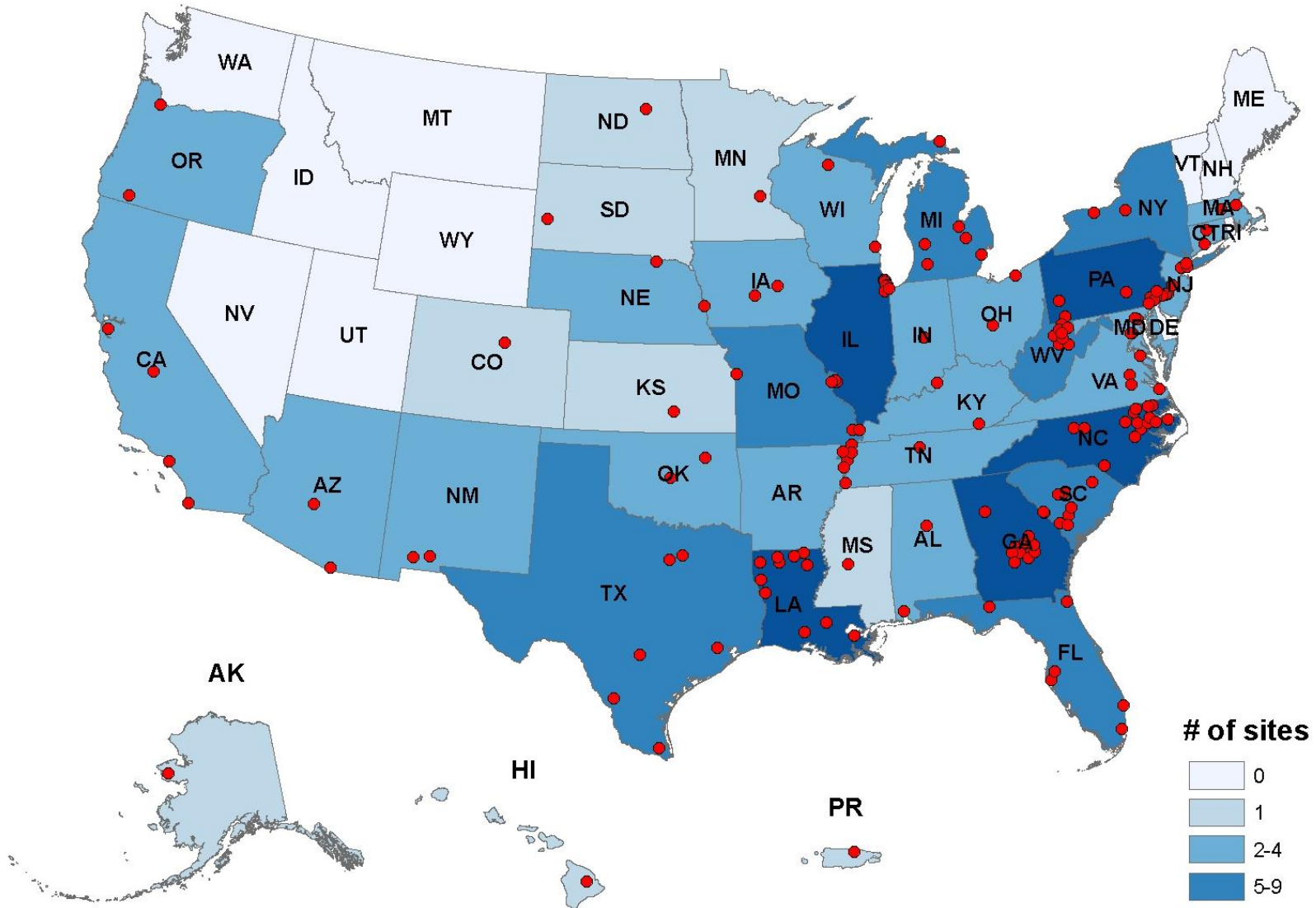
HEALTHY START AND PERINATAL SERVICES

Where are we now?

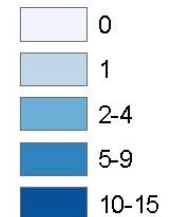
- 39 States
- District of Columbia
- Puerto Rico
- Indigenous Populations
- Border Communities
- New Immigrants



Federal Healthy Start Sites, 2012

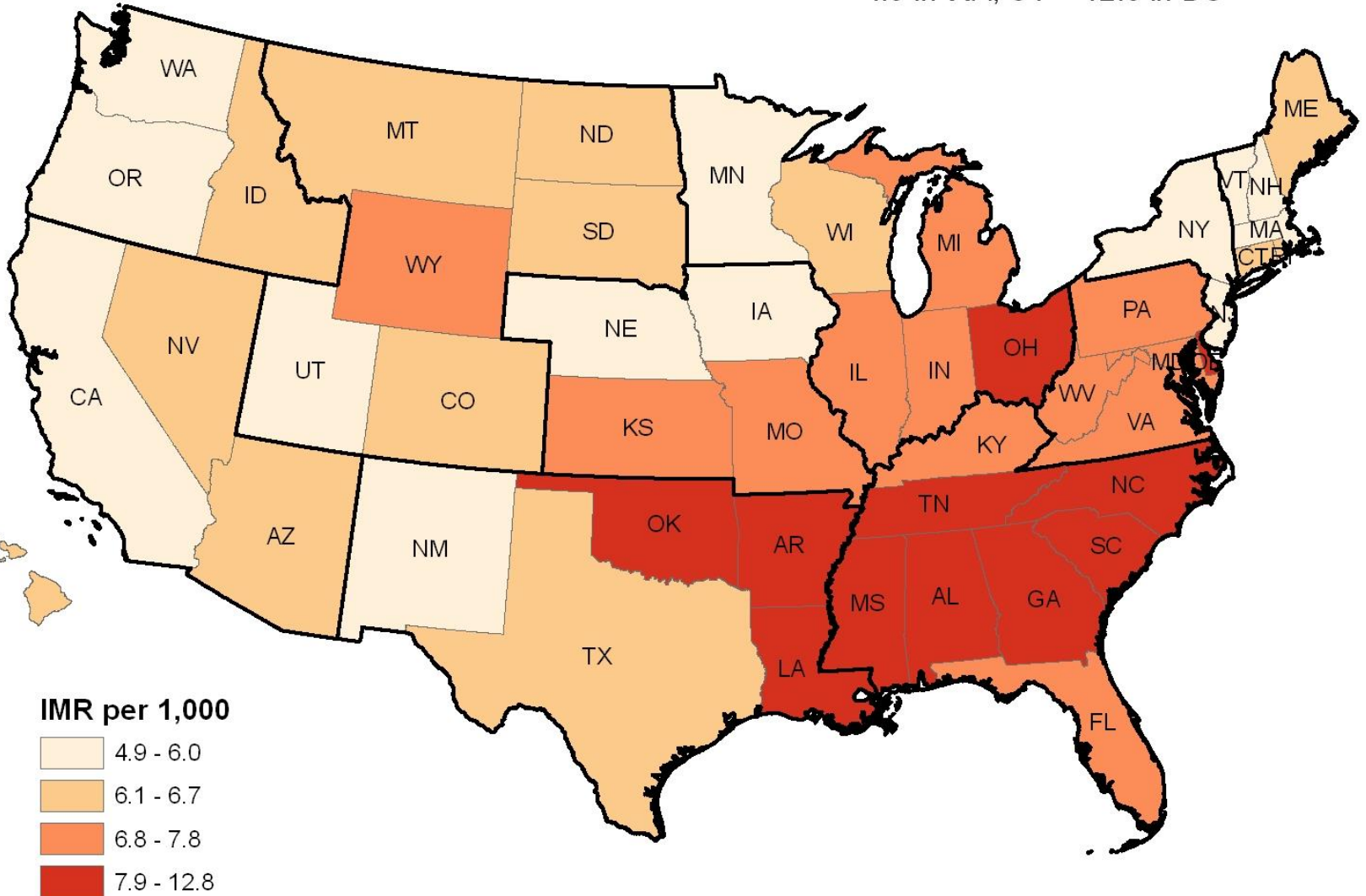


of sites



Infant Mortality Rate, 2005-2007

U.S. IMR: 6.8 per 1,000
4.9 in WA, UT -- 12.8 in DC



Authorization Language

- Factors that contribute to infant mortality
- Include a focus on Low Birthweight
- Community Based approach to delivery of services
- Comprehensive approach to women's health care to improve perinatal outcomes



HEALTHY START AND PERINATAL SERVICES

HEALTHY START

Goals:

- Improve health care access and outcomes for (high risk) women and infants
- Promote healthy behaviors and reduce the causes of infant mortality



HEALTHY START'S ROLE IN ADDRESSING DISPARITIES

- Reduce the rate of Infant Mortality
- Eliminate disparities in perinatal health
- Implement innovative community-based interventions to support & improve perinatal delivery systems in project communities



HEALTHY START'S ROLE IN ADDRESSING DISPARITIES

- Assure that every participating woman & infant gains access to the health delivery system & is followed through the continuum of care
- Provide strong linkages with the local & state perinatal system



HEALTHY START AND PERINATAL SERVICES

TARGET AUDIENCE

Families Across the Lifespan -- particularly women of reproductive age and their infants

FOCI OF PROGRAM ACTIVITIES

- Risk Prevention/Reduction
- Health Promotion
- Infrastructure/Systems Building
- Programmatic Involvement of Women, Their Families (Including Male Partners) & Communities



HEALTHY START AND PERINATAL SERVICES

HEALTHY START COMPONENTS

- 5 Core Services: Outreach, case management, health education, screening for depression, and interconceptional continuity of care
- 4 Core Systems Building: Consumer and consortium involvement in policy formation and implementation, local health system action plan, collaboration with Title V, and sustainability



HEALTHY START AND PERINATAL SERVICES

Core Interventions: Outreach

- Definition: Provision of case finding services that actively reach out into the community to recruit & retain Perinatal/interconceptional clients in a system of care
- Purpose: To identify, enroll & retain clients most in need of Healthy Start services



HEALTHY START AND PERINATAL SERVICES

Core Interventions: Case Management

- Definition: Provision of services in a coordinated culturally sensitive approach through client assessment, referral, monitoring, facilitation, & follow-up on utilization of needed services
- Purpose: To coordinate services from multiple providers to assure that each family's individual needs are met to the extent resources are available, & the client agrees with the scope of planned services



HEALTHY START AND PERINATAL SERVICES

Core Interventions: Health Education & Training

- *Definition:* Health education includes not only instructional activities & other strategies to change individual health behavior but also organizational efforts, policy directives, economic supports, environmental activities & community-level programs
- *Purpose:* The purpose of a health education campaign is to disseminate information with the goal of improving an audience's knowledge, attitudes, behaviors & practices regarding a particular area of health promotion



HEALTHY START AND PERINATAL SERVICES

Core Interventions: Screening for Perinatal Depression

- A depressive disorder is defined as an illness that involves the body, mood and thoughts. It affects the way a person eats and sleeps, the way one feels about oneself and the way one thinks about things



HEALTHY START AND PERINATAL SERVICES

INTERCONCEPTION CARE FOR WOMEN

- Outreach and case management (e.g., risk assessment, facilitation, monitoring) for women to assure they are enrolled in ongoing care (women's health/medical home) and are obtaining necessary referrals
- Availability of and access to a system of integrated and comprehensive services
- Health education (tied to identified needs includes attention to mental health, substance abuse, smoking, domestic violence, HIV and STDs)



HEALTHY START AND PERINATAL SERVICES

Core System Intervention: Community Consortium

Definition: Individuals & organizations including, but not limited to, agencies responsible for administering block grant programs under Title V of the Social Security Act, consumers of project services, public health departments, hospitals, health centers under Section 330 (C/MHC, Homeless Rural) & other significant sources of health care services



HEALTHY START AND PERINATAL SERVICES

Core System Intervention: Local Health System Action Plan

Definition:

A realistic, yet comprehensive plan of achievable steps within the four-five year funding period that will improve the functioning & capacity of the local health system for pregnant and parenting women and their families.



HEALTHY START AND PERINATAL SERVICES

SUSTAINABILITY

Essential elements:

- Integrate activity into current funding sources
- Maximize third-party reimbursement
- Leverage other funding sources
- Funding sources may include State, local, private funding; in-kind contributions
- Use the consortium



Discretionary Grant Information System (DGIS)

www.mchdata.hrsa.gov



Program Participants

- Total Women Served: 30,759
 - 29,587 – General Population
 - 1,172 – Border Population

- African American 60.6 percent
- White 20.4 percent
- Hispanic/Latino 22.2 percent
- AI/AN 3.3 percent
- Asian 1.5 percent



Source: DGIS, Calendar Year 2010 Data



Live Births to Participants

- Total Number of Live Births: 38,075
- African American 58.2 percent
- White 19.6 percent
- Hispanic/Latino 24.8 percent
- AI/AN 3.9 percent
- Asian 1.6 percent
- More than One Race 2.4 percent



Source: DGIS, Calendar Year 2010 Data



Male Participants

- Total Number of Males Served: 5,369
- African American 61.5 percent
- White 19.3 percent
- Hispanic 11.8 percent
- 17 Years and Under 20.4 percent
- 18 Years and Over 67.8 percent



Source: DGIS, Calendar Year 2010 Data



Interconceptional Care

- Number of Women Receiving IC: 28,876
- African American 63.2 percent
- Hispanic 21.5 percent
- White 19.7 percent
- Aged 20-23 29.9 percent
- Aged 24-34 39.2 percent



Source: DGIS, Calendar Year 2010 Data



Major Services: Direct Health Care

- Prenatal Care Visits 116,732
- Well Baby Pediatric Visits 50,592
- Postpartum Clinic Visits 20,725
- Women's Health 26,157
- Family Planning 22,541
- Adolescent Health 18,937



Source: DGIS, Calendar Year 2010 Data



Major Services: Enabling Services

• Number of Families Served	74,938
• Case Managed Families (PNC)	30,677
• Case Managed Families (IC)	26,210
• Outreached Families (PNC)	26,397
• Outreached Families (IC)	19,271
• Home Visiting (PNC)	21,369
• Home Visiting (IC)	20,530



Source: DGIS, Calendar Year 2010 Data



Major Services: Enabling Services

• Breastfeeding Education	30,026
• Pregnancy/Childbirth Education	23,759
• Parenting Skills	30,745
• Transportation	18,182
• Housing Assistance	6,814
• Job Training	5,231
• Translation	3,268



Source: DGIS, Calendar Year 2010 Data



Infrastructure Building

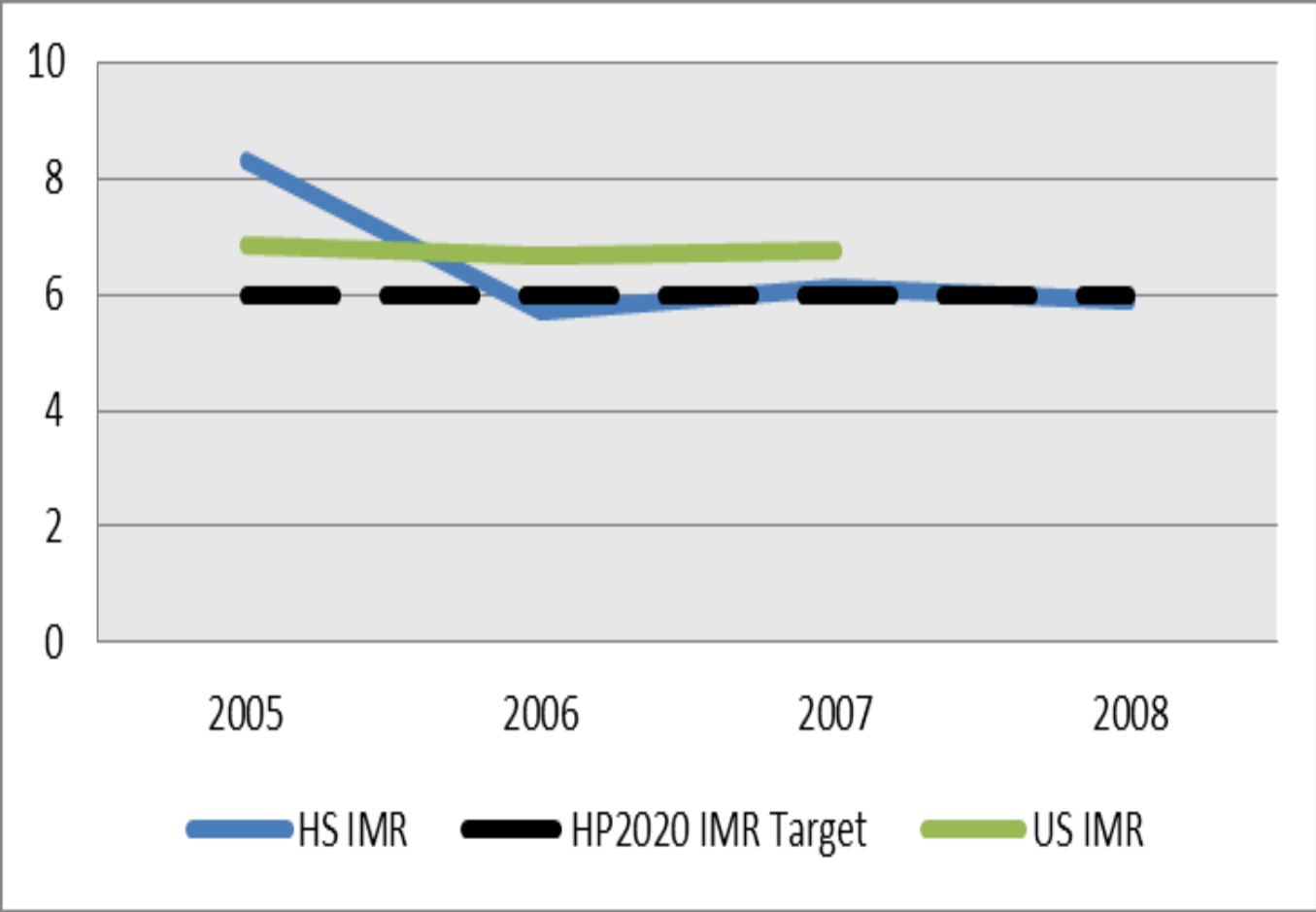
- Consortia Training 13,517
- Provider Training 10,860



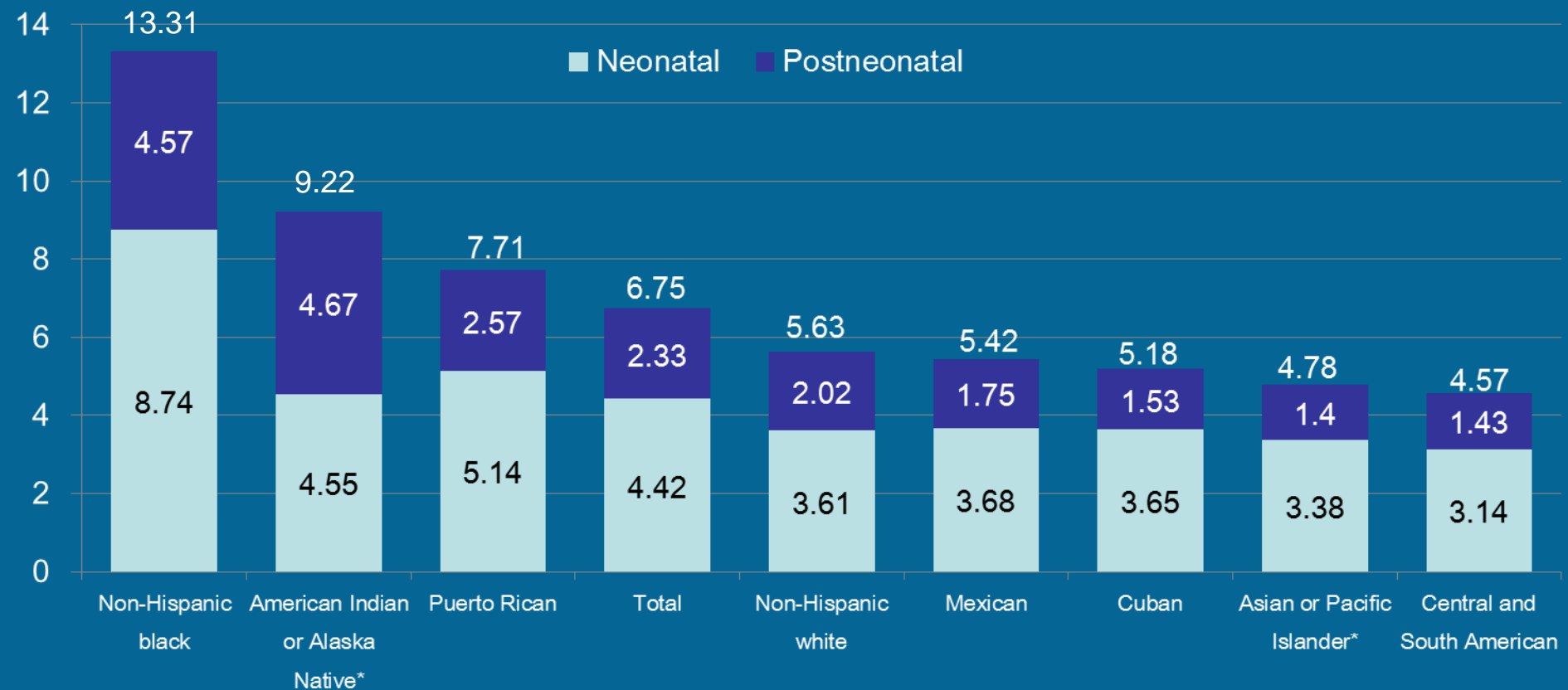
Source: DGIS, Calendar Year 2010 Data



Healthy Start Program IMR per 1,000 Live Births



Infant, Neonatal and Postneonatal Mortality Rates by Race and Hispanic Origin of Mother: United States, 2007



NOTE: Neonatal is less than 28 days; Postneonatal is 28 days to less than 1 year. *Includes persons of Hispanic and non-Hispanic origin.

SOURCE: CDC/NCHS, National Vital Statistics System, 2007 Linked File



Division of Healthy Start and Perinatal Services



Other Programs & Activities

- National Fetal & Infant Mortality Review Program
- Women's Health Initiatives
- Fetal Alcohol Spectrum Disorders Initiative
- First Time Motherhood/New Parents Initiative
- Community-Based Doula Program



TAKING CARE OF MOM: BRIGHT FUTURES FOR WOMEN'S HEALTH & WELLNESS

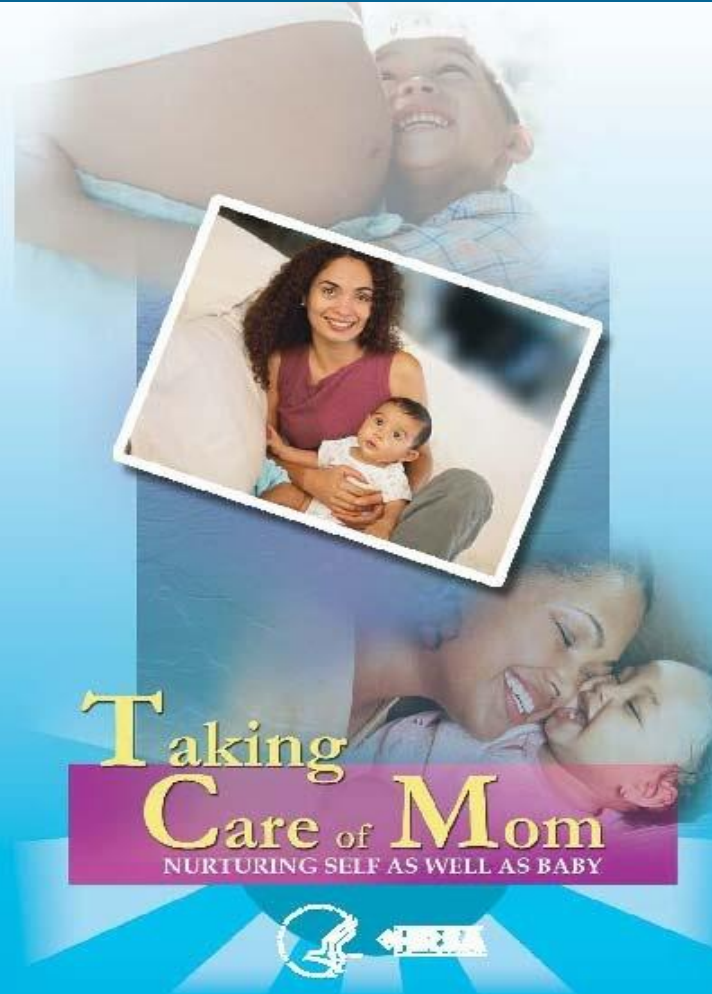


U.S. Department of Health and Human Services
Health Resources & Services Administration
5600 Fishers Lane
Rockville, MD 20857

February 2009

This booklet is available at
www.mchb.hrsa.gov/pregnancyandbeyond
Print copies can be obtained from the HRSA Information Center by
calling 1-888-Ask-HRSA

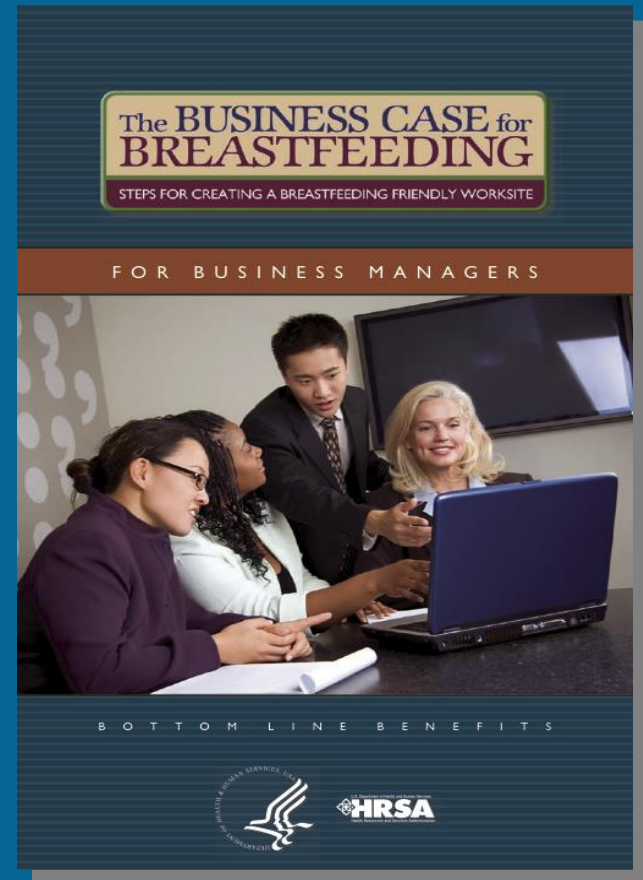
These tools are part of a series of materials called "Bright Futures for Women's Health and Wellness. These materials were developed by the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. The aim of the Bright Futures Initiative is to help women of all ages achieve better physical, mental, social, and spiritual health by encouraging healthy practices. More information about the Bright Futures Initiative is available at <http://mchb.hrsa.gov/about/owhbf.htm>



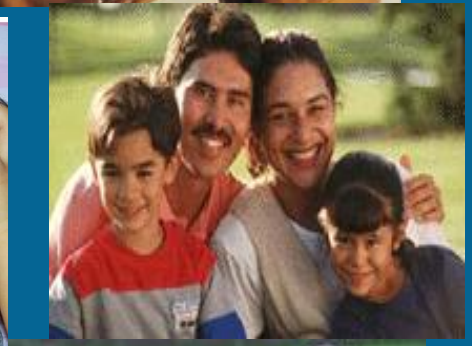
The Business Case for Breastfeeding

HRSA resource kit developed to improve lactation support in the workplace

Steps for creating a breastfeeding friendly workplace



HEALTHY START AND PERINATAL SERVICES



Healthy Women (Men)



Healthy Infants



Healthy Families



Healthy Communities



Healthy Nation



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