



NATIONAL
HEALTHY START
ASSOCIATION



SECRETARY'S ADVISORY COMMITTEE ON INFANT MORTALITY
DOUBLETREE HOTEL BY HILTON – BETHESDA
GRANTEE PERSPECTIVE
ESTRELLITA “LO” BERRY
PRESIDENT / CEO, REACHUP, INC.
JULY 10, 2012

REACHUP

where there's a will, we are the way

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MISSION

To advocate for and mobilize resources to help communities achieve equality in healthcare and positive health for families

VISION

To be known as a nationally recognized center of excellence, assisting in creating a community where there is equality in health care and health for all families

MOTTO / SLOGAN

Committed to Research, Education and Advocacy for Healthy Living!

PRESENTATION OUTLINE

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GOALS

I. SEE ME

- History of Healthy Start
- Healthy Start Core Components / Services
- Effectiveness of Healthy Start

II. FEEL ME

- Implications for Health Reform
- Life Course

III. APPRECIATE ME

- Next Steps & Discussion

SEE ME

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GENESIS OF THE NATIONAL HEALTHY START MOVEMENT

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- ❑ Healthy Start was first established as a pilot program by President George H.W. Bush in 1991.
- ❑ Healthy Start is the federal government's signature program focused on reducing infant mortality.
- ❑ Healthy Start founded upon successful World Health Organization (WHO) Infant Mortality Reduction Model.
- ❑ The last reauthorization of the program passed Congress in 2008 and was signed into law by President George W. Bush on October 3, 2008.
- ❑ The bi-partisan reauthorization bill was led by Senator Sherrod Brown (DOH), Sen. Richard Burr (R-NC), Congressman Ed Towns (D-NY) and Congressman Fred Upton (R-MI).
- ❑ Directed by the Maternal and Child Bureau of the Health Resources Services Administration, Department Health of Health and Human Services.
- ❑ Growing from 15 to 105 projects across the United States serving more than 525,000 families.



HEALTHY START CORE / PARTICIPANT SERVICES

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- Outreach and Participant Recruitment
- Case Management (Home Visitation)
- Health Education
- Maternal Depression Screening & Referral
- Interconception Care

HEALTHY START SYSTEMS BUILDING

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- ❑ **COMMUNITY CONSORTIUM**
 - Male Involvement/Inclusion
 - Consumer Participation
- ❑ **LOCAL HEALTH SYSTEMS ACTION PLAN**
- ❑ **COLLABORATION WITH STATE TITLE V AGENCY**
 - Contract
 - State Needs Assessment
 - Local MCH Plan
 - Black Infant Health Disparity Action Plan
- ❑ **SUSTAINABILITY PLAN**
- ❑ **CONTINUOUS QUALITY IMPROVEMENT**



Healthy Start engages and mobilizes communities by building on the strengths and assets of caring citizens for these types of things:

- Increase civic engagement
- Foster resiliency in communities
- Increase employment / strengthen healthcare workforce
- Leverage resource opportunities



HEALTHY START SYSTEMS BUILDING

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SOCIAL DETERMINANTS OF HEALTH

SOCIETAL CONDITIONS

- Social – freedom from racism and other forms of discrimination
- Economic – Job opportunities, education, food security
- Physical environment – housing, safety, transportation to access health care, recreation

PSYCHOSOCIAL FACTORS

- Social – social network, civic engagement
- Psychological – self-esteem, hopefulness

WE JUST DON'T DELIVER BABIES, WE DELIVER A ROADMAP TO LIFESTYLE CHANGE

HEALTHY START PROVIDES SERVICES THROUGH AN EVIDENCED-INFORMED,
COMMUNITY-DRIVEN MODEL OF HOME VISITATION

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EFFECTIVENESS OF CENTRAL HILLSBOROUGH HEALTHY START

SUCCESSFUL CLINICAL OUTCOMES

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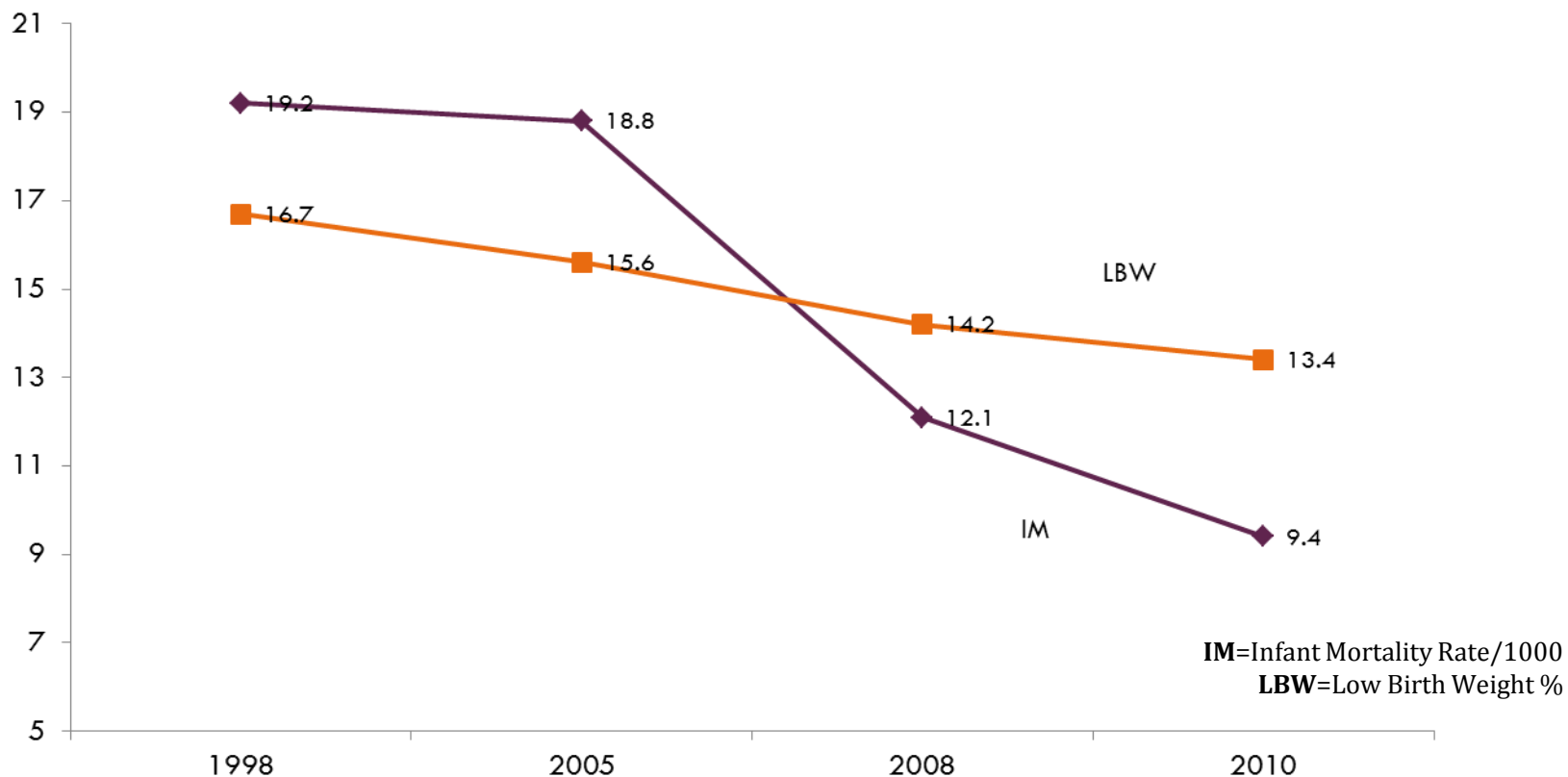
Central Hillsborough Healthy Start Program did reduce the level of low birth weight and preterm delivery by about 30% among service recipients as compared to non-recipients
(Maternal and Child Health Journal, September 2008)



CLINICAL OUTCOMES

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TREND IN RATES OF BIRTHS OUTCOME TO CENTRAL HILLSBOROUGH HEALTHY START PARTICIPANTS



CLINICAL OUTCOMES

Table 1: Low birth weight and infant death by race; Healthy Start versus Hillsborough County and Florida State (2002-2010)

	HEALTHY START			HILLSBOROUGH COUNTY N=198,373	FLORIDA N=2,770,146
	OVERALL N=6,374	SERVICE RECIPIENTS N=2,100	NO SERVICE RECIPIENTS N=4,274		
Infant death/1000					
Overall	10.1	8.5	11.9	7.9	6.8
White	5.1	6.6	4.4	5.8	5.3
Black	15.3	10.4	17.3	16.3	12.6
Hispanics	0	0	0	6.1	5.2
Others	5.8	0	8.5	7.9	5.9
Low birth weight					
Overall	15.1	11	16.3	8.4	8.4
White	12.1	7.9	14.7	7.1	7
Black	16.5	14	18.7	13.4	13.1
Hispanics	10.9	10.1	11.2	6.9	7.6
Others	8.5	4.9	10.2	8.6	7.8

CENTRAL HILLSBOROUGH HEALTHY START

MCH LIFE COURSE ORGANIZATION BIRTH OUTCOME IMPROVEMENTS

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	1998	2005	2008	2010
Infant Mortality Rate/1000	19.2	18.8	12.1	9.4
Low Birth Weight %	16.7	15.6	14.2	13.4
First Trimester Prenatal Care Entry %	66.7	66.5	64.4	66.4

PUBLICATION REFERENCE LIST

TRANSLATING PRACTICE INTO RESEARCH & RESEARCH INTO PRACTICE

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STRATEGIES, INTERVENTIONS & TENETS FOR EFFECTIVENESS

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- Health Equity
- Improved Health
- Continuous Quality Improvement (plan, do, study, act)
- Community-Based Participatory Approaches
- Development of Evidenced-Based and Best/Promising Practices
- Systems Change and Policy Development
- Life Course Movement
- Affordable Care Act (ACA)

AFFORDABLE CARE ACT

ACA PROVISIONS	HEALTHY START STRATEGIES (REACHUP/CHHS)
Preventive care	Interconception Activities, Peer support groups, ALC Interconception Strategies & Activities
Women’s health & wellness	Health Education; Community Consortium; Depression Screening; Community Resource Centers; Clinics
Innovations for the control of chronic diseases	Interconception/Health Education/Workplace Wellness
Funding for home visiting	Care Coordination/case management (professionals & paraprofessionals); local Title V Partnership
Increase ethnic diversity in providers of care	Indigenous staff (doula, case managers, nurses, outreach) ** 26 employees
Creation of more highly visible, permanent oversight and funding for minority health	FL Black Infant Health Practice Initiative, 383.2162, F.S., 2007-2008
Affordability	Local Health System Action Plan; Medicaid waiver; local & state funders; County Authority for children’s advocacy & services

REFORM HEALTH CARE INITIATIVES

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- ❑ LOCAL CLINICS – Genesis, Exodus, Premier
- ❑ COMMUNITY RESOURCE CENTERS
- ❑ COUNTY MEDICAID WAIVER PARTNERSHIP (HSC – CHHS carve out)
- ❑ STRONG START FOR MOTHERS & BABIES (Florida Association of Healthy Start Coalitions)
- ❑ BBZ - Best Baby Zone Initiative
- ❑ FQHC - Federally Qualified Health Centers



FEEL ME

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105 Projects “SHOVEL READY”



ACHIEVING HEALTH EQUITY BY BUILDING A SOCIAL MOVEMENT, INVESTING IN IDEAS, EXECUTING TASKS, RETURNING RESULTS!

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**Linking Women to
Health, Power and Love
Across the Life Span**



LIFE COURSE NETWORK PROPOSAL

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**THE LIFE COURSE PRACTICE NETWORK WILL TRANSFORM HOW HEALTHY START LEAD AGENCIES RESTRUCTURE THEMSELVES
AND LINK VARIOUS SOCIAL & CLINICAL PRACTICES TO IMPROVE WOMEN'S & INFANT HEALTH.**

DECEMBER 1, 2010

VISION:

- Create opportunities for “on the ground” training around the Life Course Perspective.
- Provide Healthy Start Projects as well as other MCH organizations and practitioners with technical assistance to effectively apply Life Course Theory to their current programs and activities.
- Serve as a clearinghouse for all Life Course practice frameworks, protocols and implementation plans to assist local Healthy Start and other MCH projects to migrate/translate Life Course Theory into practice.

MCH LIFE COURSE ORGANIZATION

SOCIAL DETERMINANTS OF HEALTH AXIS 2

<p>Public Policy Initiatives</p>		<p>Economic Empowerment Zone</p>	<p>REDHAI Racial and Ethnic Disparities in Health Action Institute Undoing Racism</p>	<p>BIHPI Black Infant Health Practice Initiative (BIHPI) *FL HB 1269</p>	<p>Tampa Housing Authority Placed Based Initiative</p>
<p>Community Environmental Impact</p>		<p>East Tampa Revitalization Community Project (ETRCP) Health Education Social Service Committee</p>	<p>Sister Circles Fitness</p>	<p>Children's Board of Hillsborough County Family Resource Centers</p>	<p>THA Bridges Tampa Housing Authority</p>
<p>Organizational Impact</p>		<p>Healthy Start Consortium & Coalition</p>	<p>Pastors on Patrol</p>	<p>Hillsborough County Breastfeeding Task Force</p>	<p>Corporation to Develop Communities (CDC) Job Readiness</p>
<p>Group/ Interpersonal Impact</p>		<p>Stress Groups</p>	<p>Male Support Groups</p>	<p>Peer Support Groups</p>	<p>Interconception Care Group • Obesity • Diabetes • Cardiovascular</p>
<p>Individual Impact</p>		<p>OB/GYN Clinics</p>	<p>Neighborhood Clinics • Genesis • Exodus • Premier</p>	<p>Case Management</p>	<p>Depression Screening & Treatment</p>

APPRECIATE ME!

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NEXT STEPS: DISCUSSION

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1. Lead strategic movement toward health equity for all
2. Co-create a standard service delivery to support families throughout Life span
3. Broker, Forge & Nurture key partnerships toward a shared vision
4. Partner with SACIM (Secretary's Advisory Committee on Infant Mortality) to further improve IM health outcomes
5. Strengthen network ties between Healthy Start sites nationwide
6. Leverage funding for a robust Healthy Start Evaluation

RUDOLF STEINER

19TH CENTURY AUSTRALIAN PHILOSOPHER, SOCIAL THINKER, ARCHITECT

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“A HEALTHY SOCIAL LIFE IS FOUND ONLY WHEN IN THE MIRROR OF EACH SOUL THE WHOLE COMMUNITY FINDS ITS REFLECTION, AND WHEN IN THE WHOLE COMMUNITY THE VIRTUE OF EACH ONE IS LIVING.”



CONTACT INFORMATION

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