January 19, 2018

Getting Off to a Healthy Start

Dear Healthy Start Project Directors, Partners and Friends:

This week’s issue of our new mini-newsletter, *Getting Off to a Healthy Start*, features *Dallas: Then & Now*, as the next installment of our series on the original Health Start projects. We're also including a little bit of "Healthy Start in the News," featuring the *Northeast Florida Healthy Start Coalition* in this issue.

To contribute to upcoming newsletters, such as photos of your holiday activities, please contact Bea Haskins, Newsletter Editor, at bhaskins@nationalhealthystart.org. Please also let Bea know if you need changes made to your listing in our email group.

We hope you enjoy reading this new format and learning about Dallas and NEFLHSC.

Deborah Frazier
CEO

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**Dallas, Texas**

**THEN:** Dallas Healthy Start was one of seven projects funded in 1994 with the goal of reducing infant mortality through more limited interventions.

Elizabeth Cowles, an NHSA founding board member, saw a need in the metroplex where too many babies were dying. The areas of greatest need turned out to be primarily African-American and Hispanic. DHS’s grantee agency then and now is the Parkland Health & Hospital System.

Jerry Roberson, PhD, began working for DHS when it received the notice of grant award, first as Program Manager and later as Project Director. As transportation to care was a huge issue, DHS

**Health Professionals from The Netherlands Visits The Magnolia Project**

The Magnolia Project, the Northeast Florida Healthy Start Coalition’s nationally-recognized preconception health initiative, welcomed two international maternal and child health experts from the Netherlands for a tour on March 13, 2017. Eric A.P. Steegers, MD, PhD, and Regine P.M. Steegers-Theunissen, MD, PhD, from the university-affiliated medical center Erasmus MC in Rotterdam, Netherlands, toured the Magnolia Project and met with several Coalition staff and partners to learn about the local efforts to improve women’s health. Dr. Steegers is a professor and chair of the Obstetrics and Gynecology Department, while Dr. Steegers-Theunissen is a professor of periconception epidemiology in the Obstetrics and Gynecology and Pediatrics Departments.
received funds from the March of Dimes for its Mom Mobile. Other efforts to reduce barriers to care led to providing services in small clinics and service centers right in the center of the targeted communities. That was the “point of connection,” as Roberson called it, as consumers were then linked to comprehensive prenatal and post-natal care in the Parkland system.

Education at the sites was a way to help the consumers, by teaching them how to get access on their own. Prior to DHS, it could take months to get an appointment. “We got them in ASAP, within five to seven days,” Roberson said.

To promote the Mom Mobile, DHS collaborated with an advertising company for promotional materials such as signs on buses and posters in the target areas. Flyers, which were printed with an incorrect phone number crossed out and the correct number in by hand, resulted in a tremendous increase in participants, helping the staff to understand how important the personal touch was.

While DHS did not do much in the way of fatherhood, they did offer multiple education classes, such as parenting. A unique feature was a Teen Advisory Committee, or TAC, which had about 15-20 kids on it, where they received leadership development, learned about maternal and child health and were trained in advocacy. They would then go speak in middle and high schools about challenges, safe sex and no sex at all. The two co-chairs sat on the Executive Board of the DHS consortium, riding from school to the board meetings and then going back to school. DHS’s consortium was 61% consumers and this was very intentional. The other 39% were service providers. The consortium gave DHS a platform in the hospital to obtain greater capacity.

The most challenging aspect for DHS, Roberson commented, was data, making it hard to tell the DHS story. Eventually they developed a good data system.

Roberson also credited Cowles for teaching him about collaboration, saying Liz was not afraid of building unusual collaborations. One example was offering nutritional cooking classes at different agencies, using that as a way to get the DHS project began in the Magnolia office space, where the Dutch doctors met with staff and learned about the work that the Magnolia does from a community and case management perspective. Community Action Network Coordinator Vanessa Jefferson, discussed how she and community partners meet the participants of the Magnolia Project where they are to supply them with what they need, while Case Manager Anna Matthews, talked about the importance of building relationships with participants. Dr. Steegers and Dr. Steegers-Theunissen were then given an inside look at the clinical portion of the Magnolia Project, followed by a quick discussion on why preconception health sites, like the Magnolia Project, are important for women living in Health Zone 1. The clinic offers women birth control, STD testing, as well as prenatal care and information on how to have a healthy pregnancy in an easy-to-access storefront in the community.

The tour continued to the Magnolia Project OASIS where Freedom Coach Sabrina Willis discussed the importance of dealing with toxic stress and how initiatives like Yoga in the Streets are a way for women to cope and relax. “It’s very interesting that you all implement Yoga into the work that you do here” Dr. Steegers-Theunissen said. “I love that you all address toxic stress and ways to reduce it. It is all so very important to healthy preconception.” Dr. Steegers-Theunissen and Dr. Steegers both gave a presentation to staff and Jersey College nursing students about the importance of including the partner in healthy decision making.

“We developed an app that teaches nutrition and encourages its users to make better health decisions as related to preconception” Dr. Steegers-Theunissen said. “Ninety percent of the pregnancies in the Netherlands are planned, and with
Dallas Healthy Start is a Level 2 program and currently has 16 staff, including Karla McCoy, who has been the project director for two years. DHS is part of Parkland’s Women’s & Infants Division, with an office in a building across from the main hospital. Dallas Healthy Start offers services in seven ZIP codes that have the highest rates of infant deaths in Dallas County.

The array of services includes case management, home visits, Medicaid access, prenatal and parenting education, depression screening and referrals, food and housing assistance, breastfeeding information, well baby care, nutrition counseling, family planning referrals, teen pregnancy prevention, transportation assistance, dental care referrals, father and male involvement, a car seat education and distribution program and substance abuse prevention, screening and referrals. Last year, well over 500 clients received a car seat through the Safe Rider program, a child safety seat and education program of the Texas Department of Public Health Services.

The prenatal classes are held at three women’s health centers and are open to the community, not just Healthy Start clients. The DHS case management model includes assessment, observation, referrals, education, resource connections and home visits. Parenting education is done one-on-one in the home, using a modified Parents as Teachers (PAT), an evidence-based curriculum utilized along with Partners for Healthy Babies, a nationally recognized, research-based curriculum used by many home visiting models to improve birth outcomes, reduce rates of child abuse, increase intervals between pregnancies, strengthen families, enhance child health and developmental outcomes and support family stability and economic self-sufficiency. The PAT is a home visiting model within an early childhood system that focuses on parent-child interaction, development-centered parenting and family well-being. Case management served 650 women, some teens, in 2016, with an average of 647 encounters per month.

Fatherhood and male involvement is offered through an agreement with Anthem Family Services, which also serves its own cliental. Anthem utilizes launching this app in 2011, we learned that women are more likely to make better health decisions when their partner is included in the process."

Below: NEFHSC Coalition CEO (and former Magnolia Project Project Director) Faye Johnson with Dr. Steegers and Dr. Steegers-Theunissen outside the Magnolia Project site.

Come to the Nation’s Capitol in March
Don’t miss NHSA’s Fatherhood Summit or Spring Conference!

Capitol Hill

Hyatt Regency on Capitol Hill
the TYRO Championship Dads program to strengthen the role of dads in their children’s lives. Anthem is also one of DHS’s CAN partners. McCoy noted that they are looking at some new partnerships for the CAN.

Liz Cowles would be proud to know that DHS survives and thrives, almost 25 years after its inception. And she’d be happy to know that NHSA is still holding annual conferences and providing other support to the grantees and the MCH field.

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**Mark Your Calendars!**

March 24-25, 2018 - Fourth Annual Summit on Fatherhood and the Health and Wellness of Men and Boys

March 26-28, 2018 - 19th Annual National Healthy Start Spring Conference - celebrating NHSA’s 20th Anniversary!

*Living the Legacy: Celebrating Advocacy for Families and Communities, Then & Now!*

**Click here to register for the Summit and/or the Conference!**

Location: Hyatt Regency on Capital Hill; $269/night.

**Click here for Hyatt Room Reservations!**