



Mother's Day was on May 10th. We didn't forget it, sending out an eblast to our extensive database. Just in case anyone missed it:



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May Health Observances

May is another big month of health observances. Just a partial list includes National Children's Mental Health Awareness Day, National Nurses Day/Week/Month, National High Blood Pressure Education Month and National Alcohol and Other Drug-Related Birth Defects Awareness Week.

NHSA is focusing on three observances in this issue: National Preeclampsia Awareness Month, National Mental Health Awareness Month (and Maternal Mental Health in particular) and National Teen Pregnancy Prevention Month, with a guest article from the folks at Power to Decide!

We have some COVID-19 updates, including news about the novel coronavirus and pregnancy. There is now evidence that kids can contract COVID-19 and we'll talk some more about rural communities and the impact of the coronavirus. Plus a few other COVID-19 things here and there. We're especially delighted to share more on how the federally-funded Healthy Start grantees are coping – how they're doing outreach, recruitment and providing services.

National Preeclampsia Awareness Month

Preeclampsia is a complication of pregnancy characterized by high blood pressure that can progress to organ damage and even death. It presents a serious risk at all stages of pregnancy, both for women and infants. "While the world deals with the immediate threat of COVID-19, obstetricians must remain highly attuned to the risk of preeclampsia in their patients. Health system executives and policymakers should consider three crucial actions to address preeclampsia and eclampsia, and improve maternal and infant outcomes in both the short and long term," according to an opinion piece in *The Hill*.



1. **Provide greater access to prenatal care, especially for at-risk individuals.** While health care professionals check for signs of preeclampsia at prenatal visits, research shows that nearly 25% of American women start prenatal care late or receive less than the recommended number of visits (13-14 prenatal visits starting between weeks eight and 10 of pregnancy). Women who have no access to prenatal care get no assessment for preeclampsia. "Congressional adoption of the nine bills that comprise the [Black Maternal Health Mominibus Act](#) will advance better screening for and monitoring of preeclampsia for all women, including at-risk populations, through innovative approaches such as group prenatal and postpartum care programs, state-based perinatal quality collaboratives and the Alliance for Maternal Health Innovation and improved access to care for women in rural areas."

Continued on page 2

**Healthy Start is
Reauthorized!**

See page 13 for details



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The National Healthy Start Association is a 501(c)(3) nonprofit organization. The mission of the NHSA is to be our nation's voice in providing leadership and advocacy for health equity services and interventions that improve birth outcomes and family well-being.

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Getting off to a Healthy Start

National Preeclampsia Awareness Month, contd. from page 1

- Maintain 24/7 Obstetricians or Certified Nurse Practitioners.** The Centers for Disease Control and Prevention (CDC) said in a 2019 report that three in five pregnancy-related deaths are preventable. At most community hospitals, OBs are called when it is time for a birth. They drop everything and rush to the hospital. Unfortunately, preeclampsia can turn into an emergency in a hurry, leading to respiratory distress and cardiovascular hemorrhage – within minutes! Hospitals could have OBs on staff to cover until the patient's own QB arrives and they need to make sure there is 24 hour coverage including nights and weekends.
- Expand Medicaid coverage for postpartum care.** Postpartum preeclampsia usually occurs within 48 hours after a birth, but can occur up to six weeks after delivery. Medicaid, which covers four in 10 births in the U.S., ends at 60 days postpartum. Experts recommend extending coverage to one year postpartum. According to researchers at the Urban Institute, "This coverage would be temporary, but it could increase access to care during a critical period following delivery when pregnancy-related health complications often occur." OBs in main or obstetrics emergency departments would ensure that postpartum preeclampsia patients are seen immediately. They would also be able to implement postpartum protocols and educate other providers about the signs and risks of postpartum health issues.

"The month of May is Preeclampsia Awareness Month. Now is the time for health executives and policy makers to step up, partner with clinicians and make these actions real. With diligence and purpose, we can improve care for the most vulnerable among us," writes Rakhi Dimino, MD, author of the opinion article.

Sources: [Health Executives and Policymakers Must Join the Battle Against Preeclampsia](#) (05/07/20).

Promise Walk Wherever - A Virtual Promise Walk for Preeclampsia

The Preeclampsia Foundation is holding a virtual promise walk this year. Their 100% online virtual walk allows participants, teams and donors to continue to give, participate and raise awareness even without a local walk location, as well as for those who need to practice social distancing due to health concerns, especially those caused by COVID-19. Click [here](#) to learn more about the Virtual Promise Walk and how to register. Or click [here](#) for their "Find a Walk" page where you can find local walks. While some walks have been postponed for the time being, some are being planned for later dates.

The Preeclampsia Foundation has more information about this health issue; click [here](#).



May is Mental Health Awareness Month

Millions of Americans live with mental illness. Numerous agencies join lead organization Mental Health America in the observance of Mental Health Awareness Month 2020. This year's theme is "Tools 2 Thrive," providing practical tools that everyone can use to "improve their health and increase resiliency regardless of the situations they are dealing with. We now believe that these tools – even those that may need to be adapted for the short term because of COVID-19 and social distancing – will be more useful than ever." Click [here](#) for their 2020 Mental Health Month Toolkit.

The National Alliance on Mental Illness also has a theme this year, which is "You Are Not Alone," even in this time of physical distancing. Click [here](#) for more info.

See page 4 for information on Maternal Mental Health Awareness Month!

Research News: **Hot Stats** and **Fast Facts**

This Month's News is All About COVID-19

Miscarriage and Maternal Mortality in Pregnant COVID-19 Patients

No longer is the coronavirus risk to pregnant women considered to be zero or close to it. There is growing evidence of maternal death, according to a recent article in *MedPage Today*. A woman in Switzerland who had COVID-19 delivered a stillborn infant at 19 weeks and researchers said it appeared to be related to placental infection. This was consistent with maternal infections found in SARS and MERS coronaviruses, though more investigation is warranted. Nine other women in Iran were reported on, seven of whom died from COVID-related cardiovascular symptoms. In a report on 150 pregnant women in China, there was only one reported case of a woman with severe cardiopulmonary morbidity. The findings from previous coronavirus infections cautions “against complacency, reminding clinicians to stay vigilant when providing care to pregnant patients...”

Source: D'Ambrosio, Amanda, [Miscarriage and Maternal Mortality in Pregnant COVID-19 Patients](#) (05/01/2020)

Navigating Pregnancy During COVID-19

UNICEF spoke with Franka Cadée, President of the International Confederation of Midwives, about how pregnant women can protect themselves and their baby during the coronavirus. They asked Cadée some questions, a few of which we show here. Click the source below to see the other questions and answers.

1. **Is it safe to continue prenatal checkups?** Some moms worry about going for a doctor's appointment while practicing staying at home and physical distancing. Cadée says to check with your health care professional to see what options are available.
2. **If I have COVID-19, will I pass it on to my baby?** “The COVID-19 virus has not been found in vaginal fluid, in cord blood or breastmilk,” says Cadée, although information is still emerging. To date, COVID-19 has also not been detected in amniotic fluid or the placenta. The best thing you can do is to take all necessary precautions to prevent yourself from contracting the COVID-19 virus. However, if you're pregnant or have just given birth and feel ill, then you should seek medical care promptly and follow instructions from your health care provider.”
3. **What questions should I be asking my health care professional?** Cadée stresses how important it is to have a trusting relationship with your health care provider. She suggests creating a system for how and when you communicate with your provider. Then, she adds, “When it comes to your plan for giving birth, it is important to ask as many questions as you need to.”



Source: [Navigating Pregnancy During the Coronavirus Disease \(COVID-19\) Pandemic](#) (04/16/2020)

Many Rural Black Women Are Giving Birth at Home During COVID-19

“Many pregnant women are seeking out midwives to deliver their babies in homes or birthing centers rather than in hospitals, where they fear being exposed to the virus. But midwives and other maternal health experts say desperate women also are delivering without any medical assistance.” This is especially an issue in some Southern states where rural black women have less access to health care providers and often there are long distances to get to the care providers. At the same time, systemic racism and inequities in health care put their lives at risk. “The coronavirus pandemic exposes a fragile health care system that already marginalized and traumatized pregnant black women,” said Dr. Joia Crear-Perry, president of the National Birth Equity Collaborative. More black midwives could be part of the solution to the problem. “More black women would choose home births if it weren't so hard to find black midwives,” said Shafia Monroe, a black midwife who's led national efforts to increase the number of midwives and doulas of color. “For black people around the country, the majority don't know what midwives do, or they're afraid,” Monroe said. “OB-GYNs tend not to like home births because it's not a part of their training,” said Crear-Perry, who's also an OB-GYN. “All we see is the catastrophe.”

Source: [Fearing Coronavirus, Many Black Women Choose to Give Birth at Home](#) (04/20/2020)

NHSA is pleased to note that Dr. Crear-Perry has been a frequent presenter at our annual conferences. Ms. Monroe has also been a guest presenter in the past.

Kids and COVID-19

Children were thought to be pretty much immune to COVID-19. However, three young patients in Los Angeles and several more in New York City and the United Kingdom have been identified as having a condition called [pediatric inflammatory multi-system syndrome](#), or PIMS, among children who have tested positive for antibodies against the novel coronavirus, indicating they were previously infected with COVID-19. Symptoms of PIMS include a high, persistent fever; swollen hands and feet; red, cracked lips; a red tongue; and red eyes. Left untreated, it can cause aneurysms in the coronary arteries. Pediatricians are encouraged to be aware of these signs.

Source: [Mystery Syndrome Similar to Kawasaki Disease Linked to Coronavirus at Children's Hospital in Los Angeles](#) (05/08/2020)

Is it Maternal Mental Health Day – Or Week – Or Month?

It All Depends Where You Look!

May 6th was Maternal Mental Health **Day**. In the UK, the week of May 4th was Maternal Mental Health **Week**. And the Awareness Events Calendar says the entire month is Maternal Mental Health **Month!** What you observe may depend on where you live or what groups' PSAs or Facebook posts catch your attention. No matter whether it's a Day, Week or Month of observances, maternal mental health deserves our attention.

In many countries, as many as one in five new mothers experience some type of perinatal mood and anxiety disorder (PMD). These illnesses frequently go unnoticed and untreated, often with tragic and long-term consequences to mothers, children and fathers alike. According to the CDC, the rate of pregnant women having a depressive diagnosis increased by seven times between 2000 to 2015. It's important to realize that depression isn't the same as feeling sad. Everyone feels sad once in a while. Depression can disrupt a person's life.

Postpartum Depression Is Different from the Baby Blues

The CDC says, "Postpartum depression is depression that occurs after having a baby. Feelings of postpartum depression are more intense and last longer than those of 'baby blues,' a term used to describe the worry, sadness, and tiredness many women experience after having a baby."

Symptoms of Postpartum Depression

The symptoms of postpartum depression are similar to symptoms of depression, such as feeling hopeless or having a loss of energy, but may also include:

- Crying more often than usual.
- Feelings of anger.
- Withdrawing from loved ones.
- Feeling distant from your baby.
- Worrying or feeling overly anxious.
- Thinking about hurting yourself or your baby.
- Doubting your ability to care for your baby.



Photo: University of Minnesota School of Public Health

If you think you have depression, contact your health care provider immediately.

Where to Go for More Information

- CDC, <https://www.cdc.gov/reproductivehealth/features/maternal-depression/index.html>
- Postpartum Support International, <https://www.postpartum.net/>
- Eunice Kennedy Shriver National Institute of Child Health and Human Development, <https://www.nichd.nih.gov/ncmh/ncmh/initiatives/moms-mental-health-matters/moms>
- Chernikoff, Leah, [What Will COVID-19 Do to Pregnant Women's Mental Health?](#)
- March of Dimes, <https://www.marchofdimes.org/complications/depression-during-pregnancy.aspx>
- Zero to Three, <https://www.zerotothree.org/resources/1889-perinatal-depression-more-than-the-baby-blues>
- Postpartum Progress, <https://postpartumprogress.com/download/new-mom-mental-health-check> (It looks like the last letter of the URL is missing, but it's not. This is a link to a great "New Mom Checklist for Maternal Mental Health Help;" the most thorough checklist we've come across!)

If Your Project Changes Project Directors...

...Please be sure to let NHSA know so we can update our records. Send the new project director's name and email address, along with the name of the previous PD, to [Bea Haskins](#) and/or [Hida Reese](#).

National Teen Pregnancy Prevention Month

MAY IS TALKING IS POWER MONTH

Start Early, Talk Often to the Young Person in Your Life

A national effort to spark meaningful conversations between young people and the champions who care about them, #TalkingIsPower occurs annually in May. Now in its third year, the campaign was created as a result of consistent sentiment regarding the power of parental influence. Specifically, according to our data, the majority of teens surveyed say parents most influence their decisions about sex.

This year, we are challenging everyone to use the conditions presented by COVID-19 to start thoughtful conversations with the young people in their lives about sex, love and relationships. This year we are asking parents and champions across the country, *“Have you talked to a young person today?”*

In a new poll, which Power to Decide commissioned for this year’s campaign, the majority of adults (57%) agree that sheltering in place during the pandemic has provided increased opportunity for conversations with the young people in their life about sex, love, relationships, and ultimately birth control. In addition, 90% of adults agree that these conversations positively influence youth to make informed decisions about these important life issues.

“Without question these trying times have upended every part of our daily lives,” said Gillian Sealy, CEO, Power to Decide. “For families, sheltering has meant increased opportunities to have conversations that can positively influence youth to make informed decisions about their lives including sex, love, relationships and ultimately contraception.”

According to an additional survey commissioned by Power to Decide, more than two-thirds of adults say, as teens, they had someone to talk with about these topics. Among those who had someone to talk to, 60% reported talking to parents, 58% to a friend, 35% to a significant other and 23% to a sibling. The overwhelming majority of adult respondents (85%) cited being able to get information they needed to access birth control. Interview responses were collected from a national telephone survey conducted in April 2020 with more than 500 men and women age 18 and older.

These conversations are important throughout the year, which is why we are counting on young adults, champions, and everyone in between to start talking. Conversations about sex, love, relationships, and future goals are key to preparing young people for the futures they envision for themselves. So, have you talked to a young person today? Whether you’re a parent, guardian, educator, provider, or mentor to a young person, join the [#TalkingIsPower](#) movement.

“We have the gift of time with the young people in our life to have thoughtful conversations that will impact their life trajectory and support their power to decide if, when and under what circumstances to get pregnant and have a child,” Sealy added. “Let’s use this time with our young people and seize the moment. Talking is power.”

#TalkingIsPower offers tools for parents and champions to start these conversations. To learn more about #TalkingIsPower visit powertodecide.org.

Power to Decide is a private, non-partisan, non-profit organization that works to ensure all people – no matter who they are, where they live or what their economic status might be – have the power to decide if, when and under what circumstances to get pregnant and have a child.

Conversation Prompt 107:

What are three things you're looking for in a partner?

It's important to talk about what values and traits to look for in a partner. Talking about what they want and what they're interested in will allow you to better understand what matters to them. It also gives you a chance to share your own ideas of what's important in a significant other.

#TalkingIsPower

POWER TO DECIDE

Conversation Prompt 106:

Have your friends discussed anything you have questions about?

Your friends give you support, love, and advice. Young people and their friends are no different—but sometimes the advice they give and receive is based more on theory than practice. Help your young person fill in the gaps.

#TalkingIsPower

POWER TO DECIDE

Two examples of Conversation Prompts from Power to Decide (reprinted with permission).

More National Teen Pregnancy Prevention Month Resources: <https://www.hhs.gov/ash/oah/news/teen-pregnancy-prevention-month/index.html>; **About Teen Pregnancy:** <https://www.cdc.gov/teenpregnancy/about/index.htm>

Getting off to a Healthy Start



Resources to Help with COVID-19 – and More!

MCH Navigator’s COVID-19 Competency-Based Learning Resources

“Challenging times call for coming together,” says the headline on the MCH Navigator page about their new COVID-19 resources. Recognizing the challenges of remote working, connecting with others and dealing with worries and needs, “there is a lot to figure out.” Click the link below for resources and information relating to COVID-19 through the lens of the Navigator’s MCH Learning Competencies. Be sure to check out [this link](#), too, for their “MCH Mini-Course in Resiliency and Adaptive Leadership.”

Source: [COVID-19 | MCH Navigator](#)

Wellness in the Time of COVID-19

“Experts are learning more every day about the new coronavirus that causes COVID-19. The American College of Obstetricians and Gynecologists (ACOG) is following the situation closely. This page will be updated as ACOG learns more about how the spread of COVID-19 affects health care for women. If you are pregnant or breastfeeding, you can find more information at [Coronavirus \(COVID-19\), Pregnancy, and Breastfeeding: A Message for Patients](#). Please note that while this is a page for patients, this page is not meant to give specific medical advice and is for informational reference only. Medical advice should be provided by your doctor or other health care professional.” (ACOG website)

Click the link below for an extensive list of questions with responses, such as:

- What if I have COVID-19 and need to see my gynecologist?
- How can I manage stress, anxiety and depression?
- I am being abused at home. How can I get help?
- I want to get pregnant. Should I wait because of COVID-19?

Source: [Coronavirus \(COVID-19\) and Women’s Health Care](#) (04/16/2020)



Public Health Response: COVID-19 Update from the CDC

A summary from the CDC addresses the public health response to the initiation and spread of the novel coronavirus and covers the period of February 24 through April 21, 2020. The authors note, “Various factors contributed to accelerated spread during February – March 2020, including continued travel-associated importations, large gatherings, introductions into high-risk workplaces and densely populated areas, and cryptic transmission resulting from limited testing and asymptomatic and pre-symptomatic spread. Targeted and communitywide mitigation efforts were needed to slow transmission.” Each area is explored in depth. They conclude by stating that control efforts must be continuously refined. “Sustained and concerted efforts will be needed to prevent future spread of SARS-CoV-2 within the United States.”

Source: [Public Health Response to the Initiation and Spread of Pandemic COVID-19 in the United States](#) (05/01/2020)

Strong Beginnings – Healthy Start Shares Safe Sleep Videos

The Michigan Department of Health asked Kent County to create some short videos for their website and social media. Strong Beginnings helped on this project. Several of the segments were done by members of Strong Beginning’s CAN!

Temperature, https://youtu.be/5scBi_5Hz0E
 Room Sharing, <https://youtu.be/QjESi86cO5Y>
 Facts, <https://youtu.be/bDT2ug-2618>
 Breastfeeding, <https://youtu.be/04d6SvAvnLs>

Back Sleeping, <https://youtu.be/PNzumSl3JjY>
 Choking, <https://youtu.be/SajUkc8HuNo>
 Help is Here—Spanish:
<https://youtu.be/SnVZ7cUxwbc>

Extra! Extra! Click the image on the right for the **complete** infographic from the March of Dimes! **Great COVID-19 Resource**, described as “everything all in one place!”
<https://caperinatalprograms.org>



Dads Shut Out of Delivery Rooms Due to COVID-19

And some fathers aren't too happy about it! Others have accepted the reality, but are sad. Midwives are concerned that the ban on no support people at delivery will lead to women delivering at home. Expectant dads in New York have sent a petition to Governor Andrew Cuomo, NYC Mayor Bill de Blasio and state health officials asking them to intervene with city hospitals to allow them in the delivery room. One mom said her husband is sad as she is. He wants to support her during the labor and delivery period, and not to have to wait until days after the birth before he can see his child. "He's just as much a part of this as I am," says the expectant mom.

Why the Ban on Dads in Delivery Rooms or the New Mom's Room After Birth?

COVID-19 is straining hospitals. "Health systems are ensuring that labor and delivery units maintain the highest standards of infection control," Denise Jamieson, chair of gynecology and obstetrics at Emory University School of Medicine, says. Many hospitals are allowing no visitors for *anyone*, whether it's a new or about-to-deliver mom or a dying parent. Adding to the confusion, some hospitals are allowing one support person, some more, some none and the situation keeps changing almost daily. One expectant mom said, "I've now been told to call and ask just beforehand."

Others are making alternative plans, such as calling their doulas or midwives. But there is a shortage of midwives and many are concerned that home birth may not be the best medical decision. Said an article about delivery rooms in Germany, "The mothers' situation is aggravated still further by the fact that there simply aren't enough midwives. The German Midwifery Association and the German Society of Gynecology and Obstetrics have been warning for some time that the shortage is causing a decline in obstetrics care. In so-called Level I hospitals, in particular, with large neonatal intensive care units attached to them, midwives often have to attend to several women all giving birth at the same time. 'That in itself is already a safety risk, and that risk will now be intensified if the women are completely on their own for long periods of time,'" says a representative of a German parental initiative that supports mothers and children. "Support for expectant mothers is therefore not just a luxury; the lack of it is a problem."



What's a Dad to Do?

Rules are rules, as the saying goes. So if mom gives birth in the hospital, she may have to go it alone with only her health care providers with her. It was not too long ago that the idea of a father being in the delivery room wasn't even considered. Mom was often sedated when it was time to go to the delivery room and dad was forced to pace in a waiting room until mom and baby were deemed presentable enough to be seen by dad or other family members. Today, that seems so archaic! While it's hard on everyone to not be together as a family, with modern technology, families can be connected virtually until they are reunited and back home. It's not the same as being there, but perhaps it's better than not being connected at all.

Sources: [How COVID-19 Complicates Pregnancy - Even if You Don't Have the Virus](#) (03/30/2020); [Expectant Dads Enraged Over Hospital Delivery-room Ban](#) (03/23/2020); [Coronavirus: No Fathers Allowed in Delivery Rooms](#) (03/23/2020)

The National Partnership for Community Leadership (NPCL) announces plans for the 22nd Annual International Fatherhood Conference. Previously scheduled to be held June 10-11, 2020 in Des Moines, Iowa, this will now convene on the same dates as a virtual event. As in the past, the conference will bring together parents, practitioners, researchers and policymakers. In line with NPCL's enduring commitment, this year's conference theme is "Fatherhood, Parenting, and Relationships: Building a New Legacy in the Season of the Coronavirus Pandemic." For more information, click [here](#) to read about all the presenters and for more information. Click [here](#) to register.

MARK YOUR CALENDARS!

Third Thursday of every month at 1:00 p.m. ET: NHTA Fatherhood Practitioners Webinars. Healthy Start Project Directors, please make sure we have your Fatherhood Coordinator in our database so they receive notices about the webinars. Send name and email address to [Hida Reese](#) and/or [Bea Haskins](#).

Getting off to a Healthy Start

How Healthy Start Is Coping During COVID-19

In the April 2020 issue, we shared some information provided by the federally-funded Healthy Start grantees about how they are providing services during COVID-19. We've continued to collect stories for this issue. Newer grantees told us they were "still trying to figure out" how to do outreach and recruitment. We are always amazed at the creativity of Healthy Start project staff in meeting challenges head on and their willingness to share ideas. Here are some of their stories.



Great Plains Healthy Start (SD)



We are a little different than most in that our Healthy Starts are very rural and on reservations. Everyone is working from home and most communities are on stay at home orders, but we are still doing enrollments and providing service on the phone and virtually when possible. We are still communicating with our partners virtually and thus continuing relationships to keep referrals coming. For outreach, we have been able to work with community groups that are providing needed items such as food or other helpful items and we can place brochures and recruitment materials in their packs for distribution. What about local food banks? Maybe you could partner to distribute materials that way. Just some ideas.

Healthy Babies Strong Families Healthy Start (CO)

Families Forward Resource Center (FFRC), Healthy Babies Strong Families Healthy Start program is a little different as well. We are not part of a Health Department. We are one out of thirty-four Family Centers in the state of Colorado. As part of our normal business operations FFRC operates a food bank and diaper bank to support our families. These services are facilitated as a drive-through pick-up service. Advocates utilize this drive-through service as an opportunity to recruit and enroll participants into the program. Also we are using our own media platforms to support with recruitment. As we continue to face these uncertain times we are continually brainstorming more creative ways to recruit and enroll.



Healthy Start Milwaukee County



We want to message our program as a light of hope and support to families. A few things we have tried recently.

- Our program supervisor designed "quarantine packets" that we mailed out to all of our enrolled families. We included COVID-19 info from our city health department partner and the CDC, tips on how to stay healthy and safe, ideas of activities for kids, coloring pages and community resources.
- Our navigators are also doing written plans with families over the phone to help them plan for what they would do if they or someone in their household were to get sick.
- We are now offering a referral bonus when we enroll someone referred to us by a client. For the bonus we have a list of items the family can choose from – diaper pack, logo item, bottles, etc. We got five referrals this week alone just from the "refer a friend" bonus!
- We are having our mental health consultant assist our maternal health navigators with virtual visits and mindful/mediation activities.
- We are dropping off grocery store gift cards, diapers and formula for families in need.

University of Illinois Chicago Healthy Start

As a new grantee we are still figuring this out. What we are doing: 1) We have key health partners as we are a part of a major health system in Chicago and they are still sending referrals. 2) The newest thing we will be trying is adding a link to our webpage and Facebook page where patients can self refer by clicking a link. We will be sharing this information with key partners once it is live so they can share with their community residents. Another community partner is looking at re-starting "text for baby." If this occurs, we will ask to share our resources on this link.



More from the Healthy Start Projects

Indianapolis Healthy Start

Our program has partnered with WIC to be included in their statewide database for referrals. We also continue to rely on current program participants for new enrollments as they communicate with family members, friends and utilize social media outlets. During this time, we address the following three core services of IHS as follows:



- Case Management – all communication with program participants are offered via phone visit
- Outreach
 - Our health educator is reaching out to local organizations for partnership/referral opportunities for program participants
 - Health fair events are on hold during this time
- Health Education
 - Baby Me Tobacco Free Program - all sessions are phone visits and vouchers are mailed out to participants
 - Safe Sleep Education & Crib Distribution - we host a weekly distribution (Wednesdays, 10A-2P). We created a process to ensure consumers watch videos and complete paperwork prior to receiving the crib.
 - Breastfeeding – The local Indiana Black Breastfeeding Coalition is hosting breastfeeding support group sessions live via Facebook
 - Parenting Support - We communicate with participants and address as many concerns as possible. We also refer them to other agencies that can provide support

Cradle Cincinnati Connections



As we all adjust to our virtual world, Cradle Cincinnati is still finding ways to serve moms and Black women in our community. In response to an influx of moms experiencing depression and anxiety due to the COVID-19 pandemic, we started a virtual five-week Cognitive Behavioral Therapy (CBT) group to address mental wellness among Black women. This is a closed group, which means the therapy sessions are only open to a core group of participants until a new session begins. This group is facilitated by Ebony Peak, Cradle Cincinnati Connections social worker, and is structured around the participants being the main drivers of discussions with facilitation and guidance from the therapist and free-form therapy – a form of therapy in which participants can engage in the group as much or as little as they want. Over the five weeks, the group will cover an introduction to CBT, an introduction to depression, self-care, mindfulness, cognitive therapy skills and goal setting.

Cradle Cincinnati Connections is also working alongside women to best support their needs and the needs of their communities during COVID-19. In the North College Hill area in Cincinnati, Cradle Cincinnati Connections began an advisory board to further build community among women, discuss issues and address barriers moms in North College Hill face. This advisory board consists of six women, and, in the past, they have hosted community events, such as a garden party and a harvest party – both in conjunction with the North College Hill elementary schools. As a way to maintain a sense of community during social distancing, the North College Hill Advisory Board had their first virtual meeting to check in on women in their community and to assess any needs they see right now. The board looks forward to continuing to build this community virtually through the pandemic and after.

Centerstone Healthy Start (TN)

Our group has been able to transition to provide all services virtually. We have been able to continue holding visits with our clients by phone and/or using Zoom. The project is enrolling families and continuing to find creative ways to reach new clients. What I am most excited about is that our team has been able to adapt quickly and has been providing virtual classes to continue to provide outreach and services to the community. Classes consist of a men's wellness forum, pregnancy support group, Adverse Childhood Experience trainings, family cooking classes, painting through stress management, expressive arts and classes to teach Spanish. We have plans to start a mommy and me class as well as a series on compassion using children's books.



Getting off to a Healthy Start

What’s Going on at the Healthy Start Projects

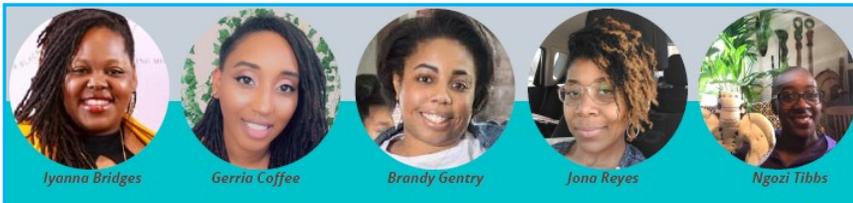
It is exciting that we continue to receive more photos than we can include in any edition of *Getting off to a Healthy Start*. We’ve set up a new album on our Facebook page with the rest of the May photos; click [here](#) to see it. You’ll know if a project has photos in the album when you see the Facebook icon by a project’s name. Check them out! And keep sending those stories and photos to our newsletter editor at bhaskins@nationalhealthystart.org!

Healthy Start, Inc. (Pittsburgh) 

Healthy Start, Inc. launched an initiative in April to increase the accessibility of doula support for birthing mothers during the COVID-19 pandemic – with a focus on support for Black women who, as research and lived perspective indicate, are most likely to experience poor birth outcomes and traumatic birth experience. This collaborative effort will connect women birthing in hospitals with doulas, primarily through virtual technology.



← Participating doulas.



Missouri Bootheel Healthy Start

April was Volunteer Appreciation Month at Missouri Bootheel Healthy Start. The CAN welcomed new members and Ambassador Volunteers were recognized. Additional volunteers were also nominated for special recognition, appreciation and service. During COVID-19, staff are reaching out telephonically and scheduling virtual meetings.

Greater Harrisburg Healthy Start (PA) 

Partnering with Healthy Steps Diaper Bank, the Greater Harrisburg Healthy Start distributed over 22,000 diapers to 450 children in the community, giving out 50 diapers per child on a first come, first serve basis. Families came from neighboring counties, as well.

"Because of job loss, hoarding and just the situation that we're all dealing with right now with the pandemic, there's a lot of diaper need in our community, and we'd like to help eliminate that diaper need and help the families," said Amanda Barnes, the Executive Director of Healthy Steps Diaper Bank. Click [here](#) for the story on the local CBS affiliate.



↑ Healthy Start and Healthy Steps prepare for the “Diaper Drive Through” on a cold and windy day in Harrisburg, PA.

Reminder: Advocacy is a year-round project. Take every opportunity you have to educate your Members of Congress, as well as your state and local legislators. Invite them to your events. Take photos. Send them the NNSA newsletter when their photo appears; they love seeing that!

Project Activities, continued

Kansas City (MO) Healthy Start

Thanks to Truman Medical Center’s Healthy Harvest Mobile Market and Happy Bottoms, KCHS Community Health Workers Marcela, Briana and Ashley gave out and/or delivered 50 bags of groceries and 2,250 diapers to very appreciative Healthy Start families during the first week in May. Not all heroes wear capes!



→ Two of the KCHS heroes!

Crescent City WIC Family Services (NOLA)



←Crescent City Family Services held a give-away recently with diapers, breast pumps and more. Click [here](#) for the news story on the local NBC affiliate, featuring Mary Shultheis, Crescent City’s Executive Director.

Extra! Extra! Read All About It!

This one really isn’t a Healthy Start story, but we had to include it.

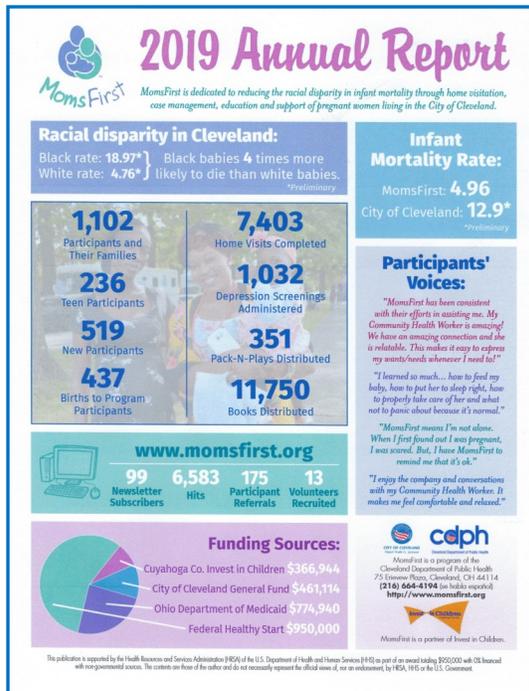


→Staff at one of New Orleans Health Department’s COVID-19 testing sites. Mary Shultheis (see above) was at the same event and took photos of some of the city workers, including the daughter of Deborah Frazier, NHTSA’s CEO. Deborah describes her as “the curly haired girl on the end behind the mask.”

MomsFirst (Cleveland, OH) ↘

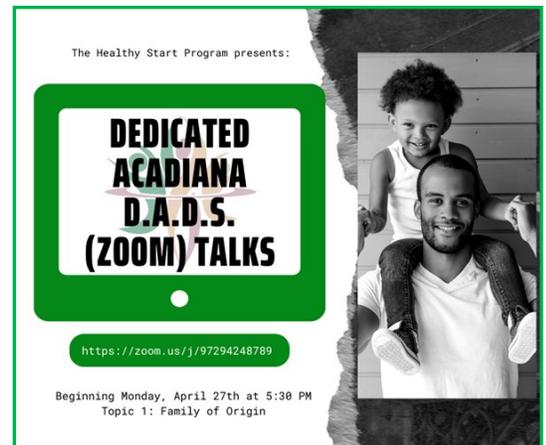
MomsFirst has been adapting to serving their 600+ participants by phone and video and conducting meetings and trainings virtually. “2019 may seem like a lifetime ago,” said Megan Walsh, Deputy Project Director, “but we wanted to share our Annual Report which provides a glimpse of the hard work and dedication our staff displays all year long.”

Click [here](#) to see the full report.



Family Tree Healthy Start (Lafayette, LA) ↓

Family Tree’s newest addition to Healthy Start services is Dedicated Acadiana Dads Zoom Talks! Greg David and Chris Lazard, Fatherhood Coordinator and Case Manager, have been preparing the 17 Vital Topics curriculum in a way that can be taught virtually to our community. So far, they have discussed how your family of origin affects your parenting style and how grief and loss influences fatherhood.



Healthy Start Projects!

Send us photos and stories for *Getting off to a Healthy Start!* It’s a great way to spread the word about what your project is doing! **Send to Bea Haskins.**

More Project Updates and Stories

Stronger Parents Brighter Futures (VA)



← Hampton Roads Region

The needs of SPBF's young families do not stop because of this COVID-19 pandemic. It's a scary time for many, but imagine being a teen parent and having even less access to the support you need. Their "great regional case managers, motherhood and fatherhood facilitators and support staff" in the Hampton Roads area are finding new, safe and creative ways to make sure their participants are receiving the things they need to survive.

From virtual meetings, to safe and curbside supply drops, to hosting assessments virtually, they are continuing to meet the needs of the population that they serve!

↙ Indianapolis Healthy Start SWOT Analysis

A SWOT Analysis is a study undertaken by an organization to identify its internal Strengths and Weaknesses, as well as its external Opportunities and Threats. IHS's Project Manager, Felicia Hanney, recently attended their monthly Maternal Child Health meeting, where each program was asked to do a SWOT analysis about how COVID-19 has impacted programs. Here is theirs, which Felicia hopes is useful to others. →

Strong Beginnings – Healthy Start (MI)

Click [here](#) for an article that mentions Program Manager Celeste Sanchez, a member of Governor Gretchen Whitner's newly-formed Coronavirus Task Force on Racial Disparities, headed by Lt. Gov. Gilchrest.



Indianapolis Healthy Start COVID19 SWOT Analysis

STRENGTHS

- IHS staff has transitioned to telecommuting and continue to reach out to enrolled program participants via telephone.
- Keeping communications going among staff i.e. self-care check-ins
- Advance training for new HRSA mandatory forms
- Tracking form created to collect mandatory data while waiting for CIS to update the CSTS
- Community collaborative efforts to help families i.e. LINKS, Inc.
- Sharing of resources across the program and networks in the city
- WIC/IHS referrals
- Staff saving money on travel/working from home
- Forward calls from CISCO office number to company cell phone

WEAKNESSES

- Home visits/assessing needs in home
- No outreach opportunities
- Are we making an impact without direct services
- "FaceTime" or Telehealth not an option
- Having to move all services to a virtual model
- Limited recruitment opportunities i.e. recruitment sites
- Staff celebrations and participant activities

OPPORTUNITIES

- New resources available in the community
- Learning new technology i.e. WebEx/Zoom
- Continue to provide vouchers/sessions for Baby Me Tobacco Free participants
- Extension of BMTF grant 09/30/2021
- Develop program continuity plans
- IBBC has transitioned to virtual meetings via Facebook
- Create innovative partnerships with community health centers, health departments, and hospital networks to ensure HS participants are receiving prenatal, postpartum, and health education i.e. Safe Sleep, Parenting Support
- Staff participating in webinars, trainings, conferences and professional development opportunities.

THREATS

- Meeting HRSA grant expectations i.e. enrollment
- Health and safety
- Unable to reach participants
- Increased mental health / depression employees/participants/community
- Future outlook after May 1st i.e. school/childcare, staff returning to work, outbreaks etc.
- Not utilizing "FaceTime" or "Telehealth" to see participants
- Will staff/participants be comfortable with home visits

Reauthorization News

Healthy Start Is Reauthorized

What Happened?

Senator Sherrod Brown (D-OH) and Representative Tim Ryan (D-OH) introduced the *Healthy Start Reauthorization Act of 2019*. With an extra push from Brown, Senator Debbie Stabenow (D-MI) and other supporters, reauthorization for Healthy Start was signed into law on March 27, 2020.

What is Reauthorization and Why Is It Important?

We have to back up for a minute to first explain what **authorization** is. Authorization is an act of Congress that permits a federal program or activity to begin or continue from year to year. It sets limits on funds that can be appropriated, but does not grant funding which must be provided by a separate congressional appropriation. We'll get to appropriations in another minute.

Reauthorization, then, is the act of a program having its authorization renewed or extended or re-established. Healthy Start has been without authorization since 2013. That means that in any year between then and now Congress could have decided to **not** fund Healthy Start! Without authorization, Congress has no obligation to fund any program, including Healthy Start. That's why it's so important to be an authorized program.

OK, So What is Appropriations? What's the Difference?

An appropriations bill is legislation to appropriate federal funds to specific federal government departments, agencies and programs. The money provides funding for operations, personnel, equipment and activities. It's like this:

- **Authorization:** *permission* to fund a particular program.
- **Appropriations:** *designating* funds for a program.

Programs *can* have appropriations without authorization, but it's *risky* to not be authorized.

What is NHTSA's and the Healthy Start Projects' Role?

NHTSA was instrumental in getting Healthy Start authorized in 2000. Under the guidance of our first Executive Director, Thomas P. Coyle, and an advocacy firm, NHTSA and the Healthy Start projects educated Members of Congress about what Healthy Start was, why it was important and the success the program was having in reducing infant mortality. Starting in 2000 with our first Annual Conference, staff and consumers from Healthy Start projects all across the country descended on Capitol Hill on the last day of the conference. NHTSA produced a packet called *Educating Your Members of Congress*, with a sample letter requesting an appointment, directions on how to get an appointment scheduled and suggestions on what to say and how to say it. The manual even included information on what to wear to Capitol Hill, that is, comfortable shoes!

Every "Hill Day" at the Annual Conferences has begun with a kickoff rally and a motivational pep talk from someone in Congress. Over the years, we've been fortunate to hear from many dynamite speakers and powerhouses in Congress such as Congressmen James Clyburn (D-SC) and the late Elijah Cummings (D-MD).

Hill Day is one of the most important activities of the entire year for Healthy Start. Newer Members of Congress may not be familiar with Healthy Start. More tenured Members may need to be reminded why the program is so important. Without those Hill visits and our Congressional Champions, Healthy Start would not be authorized and might not be funded. NHTSA sends a huge "shout out" to all of you who have trudged around Capitol Hill once a year: your hard work has paid off – again!

Timeline

1991	Federally-funded Healthy Start initiative began as a demonstration program with 15 programs (Phase I)
1994	7 "special projects" added
1997	Phase II or Replication phase began with addition of 75 projects
1998	NHTSA established
1999	19 projects added
2000	3 projects added
2000	Authorization achieved as part of Children's Health Act of 2000
2001	Phase III with 9 new grantees
2002	12 existing projects that were designated as "approved, but not funded" received new funding
2004	2 new projects added
2005	Phase 4 began with 98 projects
2008	Healthy Start reauthorized for five years
2010	Healthy Start grows to 104 projects
2014	Healthy Start "3.0" was funded for 100 grantees
2018	New funding provides for 101 projects
2020	Healthy Start is reauthorized

Bits & Pieces from NHTSA

Attention Healthy Start Project Directors, Fatherhood Coordinators and Other Program Staff!

Please keep sending us your stories about what your project is doing to resolve issues resulting from COVID-19 or when you reopen for “business as usual.” Send to bhaskins@nationalhealthystart.org.

Invite your Members of Congress to visit your project when you reopen. Click [here](#) for a link to the 2020 Congressional calendars so you’ll know when they will be in the district. Even if they’re not scheduled to be “home,” they can delegate a staffperson to attend. They’ll appreciate the invitation and it will be a great chance to talk to them about the Healthy Start Reauthorization Act! Don’t forget to take photos to send in for the newsletter!

Send Us Your Stuff!

Have you noticed that some projects have photos or stories in almost every issue of the newsletter? That’s not a bad thing—we’re happy to have their submissions.

But there are a lot of Healthy Start projects that rarely or have never submitted anything. WE WANT TO HEAR FROM YOU! Don’t be shy. You know what to do. Just look at the other boxes on this page!

Healthy Start Project Directors: Send Us Your Healthy Start in the News & Consumer Success Stories!

Don’t forget your Consumer Success stories as well as your “In the News” stories! NHTSA wants to spotlight consumers in future issues of *Getting off to a Healthy Start*. We have a form with sample questions to help you interview your consumer. To request the form, send an email to [Bea Haskins](mailto:Bea.Haskins@nhtsa.gov). If you already have a story, send it in, along with photos of your consumer and family! (Make sure you have a waiver form in your files, of course.) And if you have a nice staff story to tell, send that along to Bea, too! We’ll include them when we have space.

Attention Healthy Start Project Directors and Program Staff!

Newsletters

- Be sure to include NHTSA in your newsletter distribution list so we can include your news in *Getting off to a Healthy Start*! Please add Bea Haskins, Communications Coordinator and our newsletter editor, bhaskins@nationalhealthystart.org.
- Do you have project staff you’d like to be on *our* distribution list? Send their name, title and email address to Bea so she can add them!
- Not a Healthy Start Project? That’s OK! Let us know if you want to add someone to our distribution list.

Photos, Stories and More

- Send us photos and news stories for inclusion in the next issue of *Getting off to a Healthy Start*!
- The deadline is the 6th of each month. **(June 5th for the June 2020 issue!)**
- Send everything to [Bea Haskins](mailto:Bea.Haskins@nhtsa.gov).

Stay Connected with NHTSA on social media!

