



February 7, 2018

Dear Healthy Start Project Directors, Partners and Friends:

As we get closer to NHSA's 4th Annual Fatherhood Summit and 19th Annual Spring Conference, we will include some "teasers" to encourage your attendance and participation. This week's issue of our new mini-newsletter, *Getting Off to a Healthy Start*, features **Detroit: Then & Now**, as the next installment of our series on the original Healthy Start projects. We've also got a great picture of Westmoreland Healthy Start/Virginia Healthy Start Initiative's holiday celebration!

To contribute to upcoming newsletters, such as photos of your consumer 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 are enjoying our new format and learning about the original projects.

Deborah Frazier
CEO

Exciting Presenters are Being Lined Up for NHSA's 19th Annual Spring Conference

Donald K. Warne, MD, MPH, will speak on *Preterm Birth and Health Equity: Impact of Childhood Experiences and Historical Trauma on American Indian Health*. Dr. Warne holds the Mary J. Berg Distinguished Professorship in Women's Health at North Dakota State University, where he is also the Chair of the Department of Public Health and Professor at the College of Health Professions. Don't miss his presentation on Monday, March 26th!



Here's the link to Dr. Warne's blog: <http://donphadventures.blogspot.com/>



The Original Healthy Start Projects: This week, we feature Detroit: Then & Now

Felicia Lane, a former client and now a CHW, is seen here enrolling other pregnant women into the IPH/HSD program.

THEN: The original grantee for Detroit Healthy Start was the City of Detroit. According to "Early Implementation Lessons Learned" (Vol. II in *The Healthy Start Initiative series*), Detroit's infant mortality rate of 26.3 deaths per live births was due in great part to poverty and related social and economic conditions. Marsha Thomas, a social worker then and now, recalled that her case load was around 50 clients at any one time and that she did five home visits a day. The staff of 20-30 was based at the now-closed Herman Keifer Complex.

Similar to other grantees, DHS offered educational classes on childbirth and parenting. Breastfeeding, said Thomas, wasn't talked about then compared to now. Then it was considered sort of taboo, she said, and even now, there are still some people who don't see its benefits. DHS had a lactation specialist who encouraged the moms to tell the nurses that they wanted to breastfeed. "Skin to skin" was the phrase they used.

One of Thomas's favorite memories is the baby showers DHS held, with refreshments and presents such as baby blankets and t-shirts. Every now and then they'd have a raffle for a new crib. Dads were encouraged to attend the showers, but not many did. Thomas did not recall a specific fatherhood/male

involvement endeavor.

Another aspect that Thomas remembers well is their Grief Support Group. When a family lost a baby, the investigation by the police into the death made the parents feel even worse. The team would help them through the stages of grief and with how the police investigation into the death made them feel. She said that DHS, like all original Healthy Start projects, had a Fetal and Infant Mortality Review program.

Transportation to obtain services was a major barrier for Detroit, as well as many other grantees, according to *Telling the Healthy Start Story: A Report on the Impact of the 22 Demonstration Projects*. Twenty-two percent of DHS women missed medical appointments and the average number of appointments missed was 2.2% per client. To address this barrier, DHS engaged in a “progressive partnership” with a transportation program already in place and expanded the service to the target area. The transportation program “exceeded its ridership goals of 2,500 trips by 77% (4,442 trips)” in one full year!

DHS’s consortium was comprised of current and former clients, community people and others. It was well attended and the consumers were very vocal. Clients would get awards for participating. Thomas remembers her time with the original DHS fondly.

NOW: Things have changed for the Healthy Start project in Detroit. In 2014, the project moved from the City of Detroit to the Institute of Population Health and the name changed to IPH Healthy Start Detroit (IPH/HSD). Gwendolyn Daniels, DPN, RN, is the Interim CEO of IPH, which is a 501c3 non-profit organization. IPH/HSD is a Level 3 program and is also a Federally Qualified Health Center Look-Alike. IPH/HSD serves eight zip-codes in the lower east side of Detroit. There are currently 20 staff and they are located at the Institute for Population Health, Inc.

IPH/HSD follows the Healthy Start 3.0 approaches:

- Improve Women’s Health
- Promote Quality Services
- Strengthen Family Resilience
- Achieve Collective Impact
- Increase Accountability through Quality Improvement, Performance Monitoring and Evaluation.

Healthy Start clients are assessed for risks and then a care plan is developed. Infants are screened for developmental factors and parents are provided education, coordination and referrals for infants as needed using a state certified case management program. This model allows social workers and nurses to provide nine home visits during pregnancy and nine for the infant.

IPH/HSD’s goals are to see 500 pregnant women and 500 non-pregnant women and infants each year. In 2016, they saw over 1,440 clients and had contact with 2,500 pregnant women, non-pregnant and parents of infants! As of May of 2017, IPH/HSD had seen 300 pregnant women, 350 infants and 300 non-pregnant women. Daniels said that IPH/HSD receives referrals from hospitals, Medicaid Health Plans, community organizations, case findings, WIC offices and a network of community stakeholders. Identified pregnant women are provided services.

Daniels said the strength of the program is active participation in maternal mortality reviews, initiated infant safe sleep classes and facilitated community discussions to address toxic stress and adverse childhood experiences. She also noted that one of the program’s strengths is their Community Health Workers (CHW) who know how to reach high-risk women and infants to get them into care. This outreach effort expands 40 agencies and touches more than 1,200 families annually. The CHWs enroll eligible pregnant women and infants under three years old for services using the *Partners for a Healthy Baby* evidenced-based model. The fatherhood component is in development, but the dad is now included in the care of the mother during pregnancy and parenting after delivery.

NHSA Representation at AMCHP's 2018 Annual Conference!

NHSA President Kenn Harris will moderate a plenary panel at AMCHP’s Annual Conference on Tuesday, February 13th, at 9:40 a.m. The panel, *Guys’ Café: The Value and Reality of Engaging Dads and Young Men in Family Health*, will explore the status of male engagement in family health efforts, the outcomes of meaningful male involvement for programs and families and lessons from efforts to increase that involvement.





Virginia Healthy Start Holiday Luncheon

At the Westmoreland Healthy Start luncheon in December, participants were treated to an educational component about holiday stress management. Books were also distributed to encourage reading with children.

Come to the National's Capitol in March!

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

March 26-28, 2018 - 19th Annual 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.

Click [here](#) to make your reservations at the Hyatt Regency on Capitol Hill.

[Visit our website](#)