

Getting off to a *Healthy Start*



A NEWSLETTER OF THE NATIONAL HEALTHY START ASSOCIATION, INC.

Fall 2006

NHSA NHSA Awarded Leadership Training Grant

The NHSA was recently notified that it has been awarded a new \$300,000/year, three-year grant from the Health Resources and Services Administration of the U.S. Department of Health and Human Services. Utilizing findings from the recent conferences and surveys of the NHSA membership, the Association proposed to develop, implement and operate the Healthy Start Leadership Training Institute (HSLTI) to provide technical assistance, training and support to the project directors and other key staff of the federally funded Healthy Start projects throughout the country. This grant will also support the infrastructure needed for this activity.

The overall goal of the HSLTI is to strengthen the leadership skills of Healthy Start staff responsible for designing and implementing health services for women, infants and children. The NHSA envisions the Institute convening two times per year, each for two days. Each year, two topic areas will be chosen as Learning Institute curricula for that year. The topic areas will be chosen based on the technical assistance priorities developed from the regional conferences, input from project

directors and staff and consultation with the Maternal and Child Health Bureau/Division of Healthy Start and Perinatal Services.

The Learning Institute's topic areas will begin with the Healthy Start *Strategies for Success* toolkit that was initially developed as one of the Annie E. Casey Foundation funded toolkits. This session will be broadened to include leadership skills important to the implementation and sustainability of a successful Healthy Start program. It is anticipated that the second session in Year One will focus on the attributes, skills and ethics of leadership. With these as first-year curricula, subsequent topics will be based on leadership for specific Healthy Start core components and interest areas that include case management, consumer involvement (recruitment and retention), consortia development, fatherhood, depression/mental health, interconceptional care, sustainability, evaluation and data use.

Watch this space for more information about the new Healthy Start Leadership Training Institute.

2006... 2006 Regional Conferences Provide Direction for Future

With a second special Congressional funding initiative, the NHSA held a second series of regional conferences in 2006. The purpose of these conferences was to provide technical assistance based on the needs that came out of the 2004 regional conference findings. Recommendations from the 2006 regional conferences were based on observation at the regional conferences, conversations with project staff or at Regional Communications Network (RCN) meetings and/or the outcome evaluation.

Every effort was made to ensure that each Healthy Start project attended its regional conference and there was

an 84% participation rate among the projects. Overall, 55 project directors and 345 other staff registered, along with 156 consumers, 37 consortia leaders or consortia members and 69 categorized as "others," for a total of 662.

Participant evaluations reveal an overwhelming satisfaction with the conference content and sessions. Better than 96% of participants found the regional conferences to be a useful way to provide technical assistance. Participants found the meetings most valuable for networking and sharing, exchange of

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Healthy Start



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The National Healthy Start Association, Inc., is a 501 (c) (3) nonprofit organization. Its mission is to promote the development of community-based maternal and child health programs, particularly those addressing the issues of infant mortality, low birthweight and racial disparity.

Letter from the President

Greetings to the Healthy Start family!

During this holiday season, let us take a moment to reflect on the year behind us as well as the year ahead. Your Association continues to strengthen partnerships through efforts with the Annie E. Casey Foundation (AECF), March of Dimes, CityMatCH, Grantmakers for Children, Youth and Families, AMCHP, CDC, NACCHO, Today's Child Communications and others through our Partnership grant.

This has included:

- A joint conference call with NACCO, CityMatCH and the NHSA to discuss the role of mental health, specifically depression, with Healthy Start programs.
- Ongoing dialogue and financial support from the CDC to research the impact and views of African American women and preconceptional care.
- Serving as a co-sponsor for Today's Child Communications' upcoming Fifth Annual National Parent and Provider Enrichment Conference in Arlington, Virginia on January 12th and 13th. *Healthy Start sites will have the opportunity to apply for consumer scholarships in order to waive their registration fees.*
- An upcoming conference call with Grantmakers for Children, Youth and Families, along with the AECF, to discuss collaborative efforts between AECF and NHSA. This will also give us the opportunity to meet with other grantmakers as well.
- Continuing as a supporter of March of Dimes Prematurity Awareness events.

More recently, Madie Robinson (Pee Dee Healthy Start and former Board member) and I attended the Congressional Tri-Caucus (African American, Asian and Hispanic) Health Summit in Washington, DC. We participated on a panel to discuss the importance of community-based public health efforts in addressing perinatal health outcomes. The Healthy Start model was showcased as an example of success in working with families and other community leaders. This event included Congressional leadership along with the health liaisons for Members of Congress.

One of our most exciting partnership efforts is with the Division of Healthy Start and Perinatal Services in designing and implementing the Healthy Start Leadership Training Institute. We hope to have our inaugural session for Project Directors as a pre-session to the upcoming March Spring Conference. Space will be limited...so be on the lookout for more specifics in early 2007.

Your Association is in the late stages of selecting our first CEO and Administrative Assistant. Both of these individuals will be based out of our new office space in Washington, DC. Shortly you will receive information on our new phone and fax numbers and mailing address.

Within the next few weeks, the Nominating Committee will also be soliciting nominations for new board members. We hope that you will consider nominating someone as we continue to expand our leadership. The new term of office will begin July 1, 2007. As always, many thanks for all you continue to do to serve families throughout the country!

The NHSA's web site contains useful information for members and others, such as an online Directory with contact information for all federally funded Healthy Start projects. Go to www.healthystartassoc.org.

Legislative Update

Appropriations

The U.S. government is currently operating under a “continuing resolution,” a stopgap measure to fund programs if the fiscal year ends without a new appropriations bill in place. At last report, the Healthy Start initiative is in the FY 2007 budget at the 2006 appropriations amount of \$101,518,000. The NHSA has heard nothing to suggest a cut is looming for the initiative, nor have there been any indications that this is a good time to seek additional funding.

Reauthorization

As previously reported in *Getting off to a Healthy Start*, reauthorization for most programs, including Healthy Start, was delayed until after the November elections. Will Payne, Chair of the NHSA’s Sustainability Committee, says, “Reauthorization will be on the NHSA’s agenda for the coming year. It does not appear there is anything we can do this year.” Authorization (or reauthorization

for programs previously authorized) designates which federal programs are eligible for funding. Healthy Start was originally authorized as part of the Child Health Act of 2000, and no opposition to the reauthorization legislation is anticipated. As with other programs up for reauthorization, funding is not in jeopardy because of the delays in reauthorizing those programs.

Beginnings Guides Available at Discounted Prices to NHSA Members

NHSA members receive a discount on orders of the *Beginnings Guides’* “Pregnancy Guide” and “The New Parent’s Guide.” The special price is available at any time. Practice Development, Inc., the publishers, makes a donation to the Association based on member orders. For more information about the *Guides*, visit www.BeginningsGuides.net.

Regional Conferences...from page 1

knowledge and ideas and sharing best practices and innovations. Project directors approved of the regional conference concept as a way to involve more program staff than they are able to at the national conferences or meetings. Other modes of delivering technical assistance as listed by participants included information accessible via website or email, direct customized technical assistance, periodic meetings and workshops or group gatherings for more in-depth information and skills transfer.

During this series of regional conferences, participants were introduced to the NHSA’s Peer Learning Network (PLN) and project directors worked on the establishment of their respective RCNs. With the introduction of the PLN, participants became excited about its possibilities and the value it will add to existing technical assistance venues (e.g., the NHSA’s Spring Conference and regional conferences, and the HRSA/MCHB Healthy Start Grantee Meeting).

The RCN concept was well received by project directors and designated administrative staff in attendance, and viewed as a means to communicate with their peers beyond national meetings, as well as a method to focus on priority issues as defined by their region. Facilitators guided each regional network through a generic outline to assist each region in the process of developing its RCN.

Through the regional conference format, the NHSA continues to learn from its constituents and, in turn, is able to provide the appropriate tools (technical assistance, resources and services) to build and strengthen Healthy

Start projects region by region. As a result, the NHSA is gaining information and building the momentum necessary to deliver the long-term solutions required to sustain healthy babies, healthy families and healthy communities.

Recommendations from the Regional Conferences

1. Develop, distribute and utilize training materials and provide training sessions to address consumer leadership and consumer participation issues.
2. Develop, fund and implement a plan to “tell the Healthy Start story” through the voices of Healthy Start consumers.
3. Initiate a national discussion on making male involvement an optional core component of the Healthy Start initiative and explore how to make this happen.
4. Develop and implement a strategy to explore the ever-expanding diversity of the Healthy Start population and a plan to address the needs of new populations.
5. Coordinate with HRSA/MCHB on the program content of the NHSA’s Spring Conference, future regional conferences and the Bureau’s Grantee Meeting to reduce the likelihood of repetitive information.
6. Address specific logistical issues relating to the regional conferences, including, but not limited to how often to hold regional conferences and possibly reconfiguring the regions.
7. Utilize the NHSA’s web site to better survey and serve the Healthy Start projects and develop interactive evaluation sessions at future conferences.
8. Seek ongoing and sustainable funding for future regional conferences.

Partners

Partner's Corner: Today's Child Communications

Today's Child Communications, Inc., (TCC) is a leading health communications and marketing firm reaching and serving African American families. Today's Child Communications' services and products enhance individual parenting skills, health seeking behaviors, education and access to resources. TCC works with companies and community-based organizations to enhance their outreach to African American families, increase their market share, visibility and program/product delivery capacity.

Today's Child Magazine, the corporation's flagship product, is a quarterly must-read for parents raising children from infancy to age 17. The number one parenting magazine serving black families, *Today's Child* supports parents by offering them crucial information and advice during one of the most rewarding and challenging times of their lives: parenthood. Intelligent, contemporary, upbeat and beautifully packaged, *Today's Child* is the nation's premiere, parenting and child health magazine. Each issue offers authoritative, well-researched and compelling articles by top-notch writers and experts that address its audience's questions, needs and lifestyles.

Today's Child offers conferences that convene parents, community leaders, providers and the public and private sectors together to dialogue about improving health, education, wealth building and access to technology for families. Annually, TCC, in collaboration with organizations, civic groups, associations and corporations, hosts a national parent and provider enrichment conference, health forums and parenting seminars. Focusing on five primary areas, Parenting, Health and Wellness, Education, Wealth Building and Technology, Today's Child Communications' national and regional forums offer parents, providers and community leaders

the opportunity to dialogue and think strategically about the issues facing families and children. Don't miss the January conference. To register, go to www.Todays-Child.com.

Today's Child Communications' marketing, promotions and development services are designed to maximize market share, product/program impact, resources and visibility of companies and organizations whose mission is to provide services and products to families. TCC works with organizations to improve the delivery and quality of their services, enhance the company's ability to reach out to and engage their target audiences, increase community exposure and attract and maintain the critical collaboration, attention and/or support of other professionals, policy-makers, funders, volunteers and the general public. TCC also provides program development, marketing and grant writing services to non-profit and charitable organizations dedicated to serving families and the community at large.

The National Black Family Promotions Coalition (NBFP), spearheaded by Today's Child Communications in 2000, is a membership advisory group with national and regional affiliates, dedicated to addressing family well being and quality of life issues. The Coalition works on groundbreaking initiatives to uncover the causes of disparities in health outcomes among African American families.

Today's Child Communications was founded by Michelle Drayton-Martin, one of the first founding directors for Healthy Start/NYC and co-founder of the National Healthy Start Association. Today Ms. Drayton-Martin continues to work with the National Healthy Start Association on special projects.

Research

Research News

Recommendations to Improve Preconception Health and Health Care in the U.S.

Utilizing mounting evidence that pregnancy is too late to address poor maternal and birth outcomes, the U.S. Centers for Disease Control and Prevention (CDC) developed a strategic plan to improve the health of women and men of reproductive age so they may be in optimal reproductive health prior to pregnancy.⁽¹⁾

There are no nationally accepted standards for preconception care (PCC) and interconception care (ICC), which means between births. The CDC released four goals and ten recommendations with action steps that were guided by research, two expert panels and a National Summit on Preconception Care. At the summit, presentations by Healthy

Start programs, public health officials, the CDC, the March of Dimes, federally qualified health centers and many community and national partners provided evidence that the time is right to bring forth a national strategic plan for PCC.

Healthy Start Has a Role

The CDC's report recommends analyzing and evaluating Healthy Start activities and supports program replication.⁽¹⁾ All Healthy Start programs are called to action to work with local, state and national public and private partners to develop and introduce preconception care standards into clinical practice. As an ongoing laboratory, Healthy Start programs and their partners in PCC need to be armed with the latest information.

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Spotlight on Consumers

This issue features consumers from two projects located in the Midwest Region: St. Louis, Missouri, and Genesee County Healthy Start in Flint, Michigan.

Spotlight on Carolyn Dickerson



When Carolyn Dickerson was 19, she gave birth to Isaac Jaywane Dickerson-Williams, born at 34 weeks gestation. This single mom was referred to St. Louis Healthy Start's direct service contractor, Nurses for Newborns Foundation. Carolyn readily accepted Case Manager Gwen Stubblefield's invitation to become part of this relatively new Healthy Start program.

As she became more involved, Carolyn was asked to represent St. Louis Healthy Start at the NHSA's Spring Conference in Washington, DC, in March 2006. This was the first time she had been outside of just a few neighborhoods in her city, and opened Carolyn's eyes to possibilities she never knew existed.

"The Healthy Start program has supported me from day one...They have brought me so much joy to my life and my son's life. They inspired me to be a better person and to open my mind to new and better things that are going on in a world I did not know," Carolyn is now a member of St. Louis' Healthy Start Advisory Council (HSAC) and serves on the Political Action Committee and Advocacy Subcommittee. Soon to be a member of HSAC's Speakers' Bureau, Carolyn is the consumer representative on St. Louis Healthy Start's grantee agency's Board of Directors' Education Committee.

Continues Carolyn, "The members of St. Louis Healthy Start are inspirational leaders. God has sent Healthy Start into my life to learn to focus on the important things in my life. I have learned how to be more professional. They are good role models to me, my son and my son's father."

Carolyn was a host at the NHSA's Midwest Regional Conference in St. Louis this year, and has enrolled in Missouri College to become a Medical Administrative Assistant. Stubblefield says, "Carolyn has such a positive attitude, and has a good head on her shoulders. She truly wants something better." Carolyn's partner, Harton Williams, is also an active member of the project. And, reports project director Sandii Leland Handrick, "Isaac, Carolyn's son, has also become a local celebrity! As the official St. Louis Healthy Start poster child, Isaac (his feet in particular) is appearing on area Healthy Start billboards, door-hangers, fliers, posters and other marketing materials."

Spotlight on Chrystal McCadden



Healthy Start graduate Chrystal McCadden is 33 years old, and mother to three-year-old Charmere Genesis McCadden. Chrystal is involved with the Genesee County Healthy Start's subgrantee, Faith Access to Community Economic Development (FACED) in Flint, Michigan. She enrolled in Healthy Start during the

third trimester of her pregnancy, after being identified by her OB nurse as high-risk – three previous miscarriages, high blood pressure, gestational diabetes and on insulin and with a limited support system.

Chrystal began attending consortium activities immediately after the birth of her daughter. She attended all meetings, shared ideas and experiences, and wrote an article for the program's newsletter. Since graduating from the Healthy Start program, Chrystal has completed a Bachelor's degree in Business Administration, completed certification as a phlebotomy technician and obtained certification as a Nursing Assistant. Recently, she became employed at FACED as a Healthy Start Maternal and Infant Health Advocate.

Says Chrystal, "Healthy Start helped me obtain knowledge about how to take care of myself as a new mother and my new sick baby. The nurse was able to give me support on taking care of my daughter's tube feedings and her anemia. The Maternal and Infant Health Advocate gave me the extra support and confidence that I could do it. I was so scared, because I didn't know much about babies, I was a single mom, and didn't have anyone to help me. If it weren't for the program, I would have lost my mind. I had severe post-partum depression, and the added caring and support really helped."

FACED's Terry Brannon says, "Chrystal is an excellent example of what this program can do for moms and babies. Healthy Start opened doors for her that she only dreamed about. Healthy Start helped her to articulate her goals, organize them into a plan of action and then gave her the added support to accomplish them." Chrystal adds, "I am a full-time mom with a now healthy three-year-old, who attends Early Head Start. I am excited about my new job as a Healthy Start Advocate. Now I can help others just like me. And I am thinking about buying a house next year."

Research News...from page 4

PCC Recommendations⁽¹⁾

- | | |
|--|---|
| 1. Individual Responsibility Across the Lifespan | 6. Pre-pregnancy Checkup |
| 2. Consumer Awareness | 7. Health Insurance Coverage for Women with Low Incomes |
| 3. Preventive Visits | 8. Public Health Programs and Strategies |
| 4. Interventions for Identified Risks | 9. Research |
| 5. Interconception Care | 10. Monitoring Improvements |

Preconception/Interconception Planning Tools Support Personal Responsibility

Evidence-based health care planning tools assist consumers to maintain updated vaccinations and appointments;⁽²⁾ reduce weight; prevent or improve the affects of chronic diseases such as cardio-vascular disease;⁽³⁾ diabetes⁽⁴⁾ and asthma;⁽⁵⁾ and planning in emergencies (e.g. hurricanes or terrorism). Yet, they are not used in assisting individuals to take personal responsibility for being in the best possible health as they take on the awesome responsibility of conceiving a future generation. Effectiveness requires developing tools for various groups, particularly those most at risk.⁽¹⁾ Healthy Start programs can be a major support to this effort since they work in areas of greatest risk for a poor birth outcome.

While over 98% of women realize the importance of optimizing their health prior to pregnancy, only 39% could recall their physician ever discussing the topic.⁽⁶⁾ Most women (95.3%) prefer to receive preconception health information from their primary care physician or obstetrician/gynecologist, but only around 55% were very or somewhat interested in receiving PCC. Women were more likely to be aware of behavioral health risks and least likely to be aware of nutritional and environmental health risks.

Poor access to quality PCC is due to many factors including lack of insurance coverage or provider reimbursement, few consumers requesting PCC and lack of provider priority. Progress has been made by 21 states with family planning Medicaid Waivers for ICC after a birth. A cost-benefit analysis by the Centers for Medicare and Medicaid Services found the services resulted in both state and federal program savings.⁽⁷⁾

Major Evidence-Based Areas Where PCC Practitioner Counseling Is Critical

Preconception Care counseling should focus on the following areas:

- **Folic Acid Consumption**^(8, 9, 10) Less than 50% of women know that folic acid can reduce the risk of neural tube defects.
- **Chronic Disease Risk Factors**⁽¹¹⁾ Consumers with chronic diseases, such as diabetes, depression or high blood pressure, should be urged by their health care provider to seek preconception counseling.
- **Infectious Disease Risks**⁽¹²⁾ Consumers need information on the importance to a future pregnancy of health care

interventions that monitor, control and prevent infectious diseases.

- **Maternal Complications, Poor Birth Outcome and Reproductive Concerns**^(11, 13) Families who have experienced previous adverse pregnancy outcomes (for example, preterm delivery, toxemia or pre-eclampsia) should have access to ICC to optimize health between pregnancies for a future pregnancy.
- **Genetic Disorders**^(11, 14, 15, 16) A family history of genetic risk factors is recommended. Families can be assisted in developing a plan for minimizing the effect of genetic problems, such as sickle cell anemia or down syndrome, and optimizing the health of both mother and baby.
- **Medications**^(11, 5) Between 18 to 60 days after conception, fetal development is most sensitive to medications that are “teratogens” (substances that cause abnormalities in a growing fetus). Changes occur to a woman’s body during pregnancy that can also alter the effect of a medication. PCC counseling allows women to plan pregnancies with knowledge of medications that may need to be replaced, adjusted for dosage or eliminated. Women should be counseled to steer clear of nonessential medications, including over-the-counter supplements.
- **Lifestyle Behaviors**⁽¹¹⁾ Consumers need counseling about the risks and impact of smoking, alcohol and drugs, being overweight or underweight and/or with eating disorders, domestic/family violence, exposure to infections and risky personal hygiene behaviors, such as douching.
- **Exposure to Environmental Toxins**^(11, 17, 18, 19, 20) Three to four months prior to conception is considered most significant in affecting reproduction and future pregnancy. An occupational / environmental history checklist added to the health history is recommended. Further study into exposure intensity may be required to determine possible work/lifestyle adjustments.

There is much that Healthy Start programs can do to promote preconception and interconception care. More information can be obtained by going to the CDC’s web site at <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5506a1.htm> for the full report and detailed recommendations. Also visit the Newsletter page on the NHSA’s website for a more detailed and in-depth version of this article. (See page 8 for the citations for this article.)

New Knowledge Path Edition: Infant Mortality

The MCH Library released a new edition of its knowledge path about infant mortality. This electronic resource guide offers a selection of current, high-quality resources that analyze data, describe public health campaigns and other prevention programs, and reports on research aimed at identifying causes and promising intervention strategies. The knowledge path is intended for use by health professionals, policymakers, program administrators and families. It is available at http://www.mchlibrary.info/KnowledgePaths/kp_infmort.html. Knowledge paths on other maternal and child health topics are also available (See <http://mchlibrary.info/KnowledgePaths/index.html>).



House Passes Burgess's Legislation for Infant Mortality Awareness Month

WASHINGTON, DC, Sep 28 -

Representative Michael C. Burgess, M.D. (TX-26) introduced House Resolution 402 directing Congress to observe September as Infant Mortality Awareness Month. Today, the House of Representatives passed this resolution.

"Infant mortality rates are appalling," said Rep. Michael Burgess. "As we have seen in various news reports, Tarrant County, back in my North Texas district, has a higher infant mortality rate than the national average. This is unacceptable in today's high standard of health care."

Infant mortality is still a significant cause of death in the United States. In 2002, the infant mortality rate in the United States reached 7 deaths per 1000 live births, the first increase since 1958, ranking the United States 28th among industrialized nations in the rate of infant mortality. Among minorities, the problem is especially devastating--the mortality rate for African American women is more than double that of Caucasian women.

"With passage of this legislation, and other important measures like the reauthorization of Community Health Centers, I hope we can stop this devastating trend," said Rep. Michael Burgess.

The goals of Infant Mortality Awareness Month are to increase national awareness of infant mortality and contributing factors, and to urge community leaders to assist in efforts to meet the objective of reducing the rate of infant mortality in this country by 2010.

Congressman Burgess has been working actively for several years to tackle this issue both from local and national levels. He has worked to get funding in the Labor-Health and Human Services annual Appropriations bill that would give support to local entities whose mission is to curb infant mortality. A perfect example of this mission in practice is occurring in Fort Worth today through the Fort Worth Infant Mortality Task Force.

"So goes the health of the mother; so goes the health of the family; so goes the health of our country," said Jerry Roberson, President, Infant Mortality Task Force. "Congressman Michael Burgess is of extreme importance to the issue of infant mortality. He is not only a physician, but a policy maker. More importantly, he is a policy maker who understands the depths of infant mortality."

The Fort Worth Infant Mortality Task Force is an evidence-driven initiative focused on saving the lives of our communities most vulnerable. It is dedicated to access and coordination of services, research and oversight and health and intervention.

"As an obstetrician, I understand how important pre-natal health is to the well-being of babies," said Rep. Michael Burgess. "I hope that this resolution helps increase awareness on the national level and encourage communities to do a better job in protecting the health and well-being of their mothers and babies."

NHSA Thanks Burgess

NHSA President Belinda Pettiford thanked Representative Burgess for his legislation, and said in a letter to him, "As stated in the resolution, the United States has an infant mortality crisis that must be addressed. We rank 28th among industrialized nations and the infant mortality rate for African American women in this country is nearly double that of Caucasian women. These statistics are simply unacceptable and demand attention by Congress and the American public. H.Res.402 will play a critical role as the NHSA seeks to raise awareness about the importance and effectiveness of community-based programs to reduce infant mortality, low birthweight and racial disparities in perinatal outcomes."

Healthy Start projects are urged to plan special activities during the month of September to observe Infant Mortality Awareness Month. Let the NHSA know in advance what you plan, and then be sure to send any media attention received to the office to share as "Healthy Start in the News."

Become a Friend of Healthy Start!

The NHSA depends on contributions from supporters, as well as members. If you would like to become a Friend of Healthy Start, please complete the form below and send it today with your check.

I/we want to be a Friend of Healthy Start and enclose a check to National Healthy Start Association, Inc.

- \$25 Individual
- \$50 Community-based organizations; local businesses and corporations
- \$100 State or regional organizations, businesses or corporations
- \$200 National organizations, businesses or corporations
- Additional contribution enclosed \$ _____

Name _____ Company Name _____
 Address _____ City _____ State _____ Zip _____
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Please return this form with your check to: National Healthy Start Association, Inc., P.O. Box 25227, Baltimore, MD21229-0327.

The National Healthy Start Association, Inc. is a 501 (c) (3) nonprofit organization. Contributions are tax deductible to the extent allowed by law. Consult your tax advisor. Copies of NHSA's annual financial report may be obtained by writing to National Healthy Start Association, Inc., P.O. Box 25227, Baltimore, MD 21229-0327. Documents and information filed under the Maryland charitable organization laws can be obtained, for the cost of copies and postage, from the Office of the Secretary of State, State House, Annapolis, MD 21401, (800) 825-4510 (for residents of Maryland).

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Mark Your Calendars

Today's Child Communications, Inc.'s Fifth Annual National Parent & Provider Enrichment Conference, January 12-13, 2007, Arlington, Virginia, www.Today's-Child.com.

Association of Maternal and Child Health Programs' 2007 AMCHP Annual Conference, March 3-7, 2007, Arlington, Virginia, www.amchp.org.

NHTSA's Eighth Annual Spring Education Conference, March 18-21, 2007, Washington, DC, www.healthystartassoc.org.

Healthy Start in the News

Has your Healthy Start project been in the news lately? Send the NHTSA links to newspaper articles, TV news stories or radio and TV PSAs so they can be shared with your fellow projects.

STAY IN TOUCH!

Be sure to notify the Association if you change project directors or contact information, such as e-mail addresses or phone numbers. This will keep our records up to date so we can easily notify you of important news.



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