



HEALTHY START TO THE RESCUE

About the Healthy Start Programs

- Healthy Start programs are community-based and community-driven and located in the poorest neighborhoods in the United States.
- Over 90% of all Healthy Start families are African American, Hispanic or Native American - families at greatest risk for poor birth outcomes.
- Healthy Start programs work with families throughout the pregnancy and until the birth child is 18 months old.
- Among other services, Healthy Start provides care coordination for prenatal/postpartum care, depression screening/referral and follow up, parenting and health education, infant and child health follow up, fatherhood programs and support for dads.
- Since its initiation in 1991, Healthy Start has served hundreds of thousands of families.
- Every Healthy Start project has developed a consortium or Community Action Network (CAN) composed of neighborhood residents, clients, medical providers, social service agencies, faith representatives and the business community. This ensures that the whole community is committed to fight to reduce infant mortality and low birthweight, address maternal morbidity and decrease maternal mortality.

How Does Healthy Start Work?

- Healthy Start specializes in outreach and home visiting – the surest way to reach the most at-risk women and families.
- Healthy Start focuses on getting women into prenatal care as early in the pregnancy as possible. It is generally accepted by the medical and research community that early entrance into prenatal care is the single most critical factor in improving birth outcomes.
- Healthy Start has pioneered the use of women living in the community as outreach workers and home visitors. This approach has three important advantages:
 - It saves money (nurses' salaries are at least twice that of a paraprofessional or lay worker).
 - Minority pregnant women respond better to women who have "walked in their shoes."
 - It has given meaningful jobs to hundreds of previously underemployed and unemployed women who later continued their education, became community leaders and continued contribute to positive community change.

How Has Healthy Start “Come to the Rescue?”

- Major U.S. cities as well as urban counties have a disproportionate number of poor and minority families living within their boundaries. Yet, the amount of federal discretionary dollars going directly to these areas has decreased dramatically in the last 20 years.
- Healthy Start represents one of the few health and social service programs that is funded directly to the localities by the federal government. Major urban cities, Tribal and rural communities desperately need the programs that Healthy Start provides.
- Despite an eligibility criteria of 1.5 times the national infant mortality rate, Healthy Start programs have been effective in reducing the infant mortality rate below the national rate. Infant and maternal mortality is increasing in the U.S. and there are hundreds of communities meeting current criteria for Healthy Start program eligibility.
- Healthy Start remains the only MCHB investment to address infant and maternal health outcomes at the community level using the community voice as the driver to improve birth and family health outcomes.

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