

# HEALTHY START

## PROGRAM FOCUS AREAS

- Localized solutions tailored to each community's specific needs
- Connecting families with culturally sensitive and comprehensive health services
- Access to immunizations and community health education
- Ensuring that social and health services are well coordinated

The Maternal and Child Health Bureau (MCHB) Healthy Start (HS) program invests in communities to improve health outcomes before, during, and after pregnancy. Local HS projects tailor services to the needs of their communities to help reduce racial and ethnic differences in rates of infant death and maternal health outcomes.

Funding goes to communities experiencing high rates of adverse outcomes including:

- infant mortality rates **at least 1.5x** the U.S. national average; or
- high rates of preterm birth, low birth weight, and maternal illness.

The HS program began in 1991 as a demonstration, providing funding for 15 HS projects. **As of 2023, the program consists of 111 HS projects.**

## POPULATIONS SERVED AND SERVICES PROVIDED

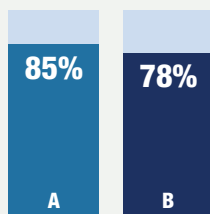
Local HS projects enroll women of reproductive age, pregnant people, new parents, children from birth to 18 months, and fathers/partners.

The HS program served about **85,000** participants in **2022**. Local projects provide:

- Prenatal and post-partum **care, screening, and referral** to services for depression and interpersonal violence
- **Outreach and case management** to link parents with social services and **educational programming** such as parent skill building
- **Public health services** such as immunizations and health education
- **Continuing education and training** on best practices for HS staff and community partners
- Nearly **47,000** HS participants were women, of which **75%** belonged to racially/ethnically underrepresented groups

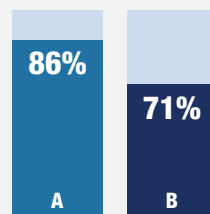
**A** Local HS projects

**B** National Comparison



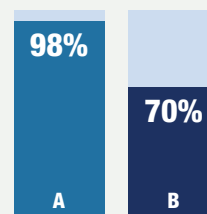
Prenatal women who received early prenatal care

Source: CDC, National Vital Statistics Reports (2021 data), Vol. 72, No. 1, Jan 2023



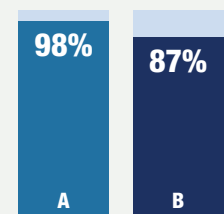
Women who received well-women preventive health care visits

Source: CDC, Behavioral Risk Factor Surveillance System, 2020-2021



Women who were screened for interpersonal violence

Source: Pregnancy Risk Assessment Monitoring System (PRAMS) 2016-2019



Women who were screened for depression

Source: PRAMS 2018



## RECENT INVESTMENTS



### Healthy Start Enhanced (HSE)

In 2023, HRSA funded 10 new Healthy Start projects aimed at reducing health disparities by focusing on non-medical factors that impact health outcomes such as transportation, housing, education, and economic stability. Each project forms a “Community Consortia,” uniting diverse stakeholders like program participants, faith leaders, Title V contributors, medical and social service providers, and public health experts to collaboratively drive systemic improvements.



### Healthy Start Community-Based Doulas

Some existing HS sites receive supplemental funding to increase the availability of doulas who provide services to people during pregnancy, birth, and at least three months following delivery. In 2021 and 2022, 44 HS sites received award funds that covered the training, certification and compensation of community-based doulas.

## Healthy Start Programs Employ

Clinical Providers, Social Workers, Case Managers, Lactation Consultants, Nutritionists, Doulas, Community Health Workers and Translators.

## HEALTHY START PROGRAM REACH

