

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 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 2024, there are 115 projects providing services in 37 states, the District of Columbia, and Puerto Rico.**

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.

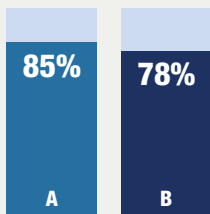
The HS program served about **85,000** participants in **2022**. Local projects provide:

- **Outreach and case management** to link parents with social services and **educational programming** such as parent skill building
- Prenatal and postpartum **care, screening**, and **referral** to services for depression and interpersonal violence
- **Public health services** such as 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.

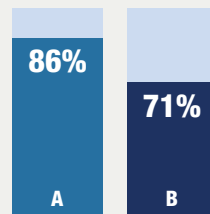
A Local HS projects

B National comparison



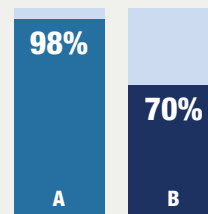
Pregnant women who received early prenatal care

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



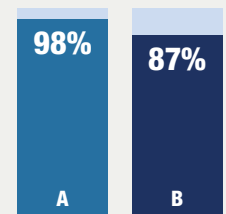
Women who received well-woman preventive health care visits

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



OUR HEALTHY START INVESTMENT



Healthy Start Projects

In 2023 and 2024, funding aims to reduce health disparities by focusing on the medical and non-medical factors (such as transportation, housing, education, and economic stability) that impact health outcomes. Each project forms a “Community Consortium,” 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.



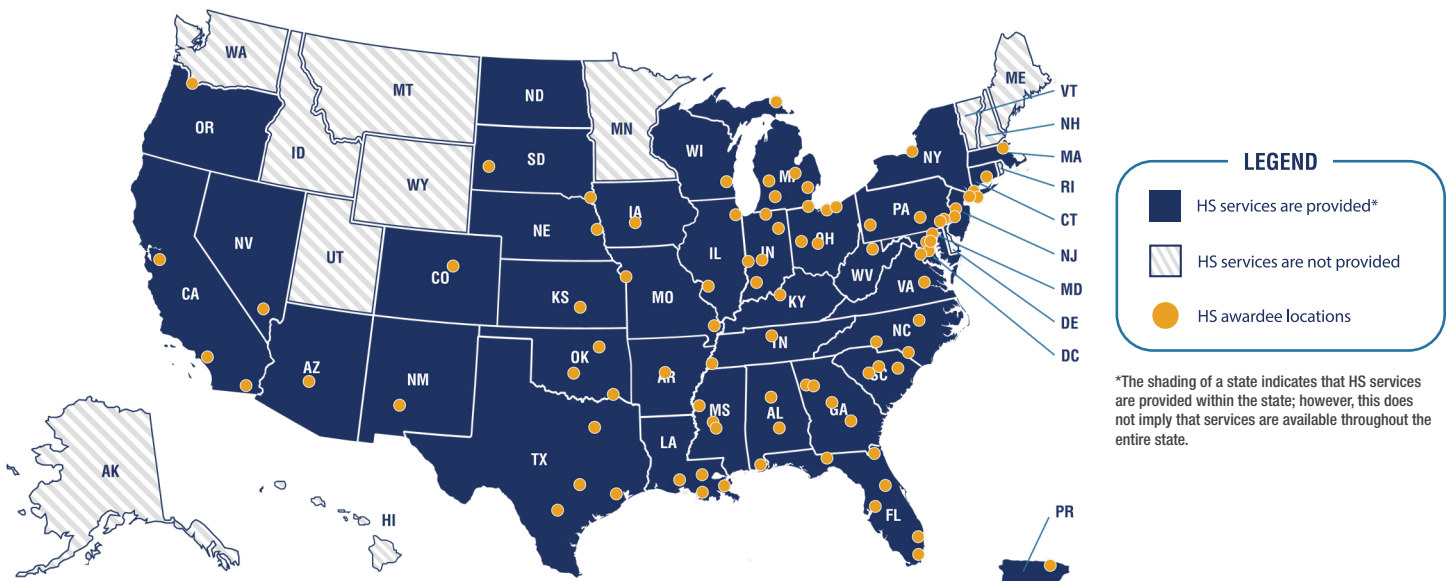
Alumni Peer Navigators (APNs)

Many low-income families struggle to sign up for the support they need after having a baby. APNs are former Healthy Start participants who have experienced these challenges themselves. They help current Healthy Start families by providing guidance and information about public benefits like Medicaid, WIC, and SNAP. APNs also address issues such as food insecurity, unstable housing, and lack of transportation, offering support that respects the family’s culture. Six sites are providing these navigator services.

Programs Employ

clinical professionals, social workers, case managers, lactation consultants, nutritionists, doulas, community health workers, and translators

STATES SERVED AND AWARDEE LOCATIONS



Learn more at <https://mchb.hrsa.gov/programs-impact/healthy-start>

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