LGC Reviewed in accordance to G.S. 159-34(a)

93.994

## MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT TO THE STATES

## State Program/Project: HEALTHY BEGINNINGS (MINORITY INFANT MORTALITY REDUCTION PROGRAM)

# U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Federal Authorization:

42 United States Code Section 701-709

State Authorization:

Senate Bill 1505

#### N. C. Department of Health and Human Services Division of Public Health

Agency Contact Person - Program	Agency Contact Person - Financial		
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### **Brief Description of Program:**

The purpose of the Healthy Beginnings Program is to fund projects in various communities to impact the reduction of minority infant mortality and preterm and low birthweight births to improve minority birth outcomes. Funds are given to local health departments and private non-profit organizations to support local community-based minority infant mortality reduction efforts.

In 1994, the North Carolina General Assembly appropriated \$750,000 annually to fund fifteen projects that would demonstrate means to lower infant mortality and low birth weight rates among minority populations. Funding was decreased in 2001 to \$700,000 to fund 14 projects. In 2009, funds from the Targeted Infant Mortality Reduction Program (TIMR) were merged with Healthy Beginnings. The goal of the Healthy Beginnings Program is to address the two-fold plus disparity between white and minority infant mortality in the State of North Carolina by targeting areas with significant minority infant mortality. A community-based approach addressing infant mortality was mandated with a specific focus on the formulation and implementation of innovative strategies to improve birth outcomes and involvement from a variety of community organizations.

Community and faith-based organizations and local health departments with experience working in minority communities are eligible to apply for Healthy Beginnings funding.

Funded recipients are expected to implement programs that will impact the reduction of minority infant mortality and low birthweight births in their communities and thereby improve minority birth outcomes. Funding is available for 3 years, contingent upon the availability of funds and performance. There are 10 sites funded at an award level of \$77,000 to \$79,000 annually.

Organizations Funded	:[]Priv	vate	[] Local Government	[X] Both
Source of Funds:	State _	<u>X</u>	Federal	