



The First 1,000 Days[®]

Newsletter

March 2017

The First 1,000 Days Program aims to work across early-life systems to prevent obesity, promote healthy routines and behaviors, and reduce health disparities among vulnerable children and families.

First 1,000 Days Pediatric Program

The First 1,000 Days Pediatric Program will soon be launching at the MGH Chelsea and Revere HealthCare Centers! We have been working with Pediatrics, Obstetrics, Community Health, WIC, Home Visiting and others to develop a pediatric program to improve maternal-child health. The Pediatric Program will have similar structure to the Pregnancy Program and will continue to work with families who received First 1,000 Days support during pregnancy as well as families seeking pediatric care for their child. Families who partook in the Pregnancy Program will have information about their participation in the program documented in their child's chart. Below is more information on selected components of the pediatric program.

Program Content	Description
Patient and family educational materials	Booklets will be provided during scheduled well-child visits that focus on topics such as sleep, soothing, feeding and developmentally appropriate play time. Families will also have access to First 1,000 Days vidscips which will cover similar topics.
Referrals to health center and community resources	The Patient Navigator will use assessments to create individualized resource sheets to send to patients via mail or e-mail. EPIC will be used to coordinate care between providers and other program staff.
Standardized text messages	Patients will receive 2-3 texts per week to support parents in their child's growth and development.
IPad assessments at scheduled well-child visits	Parents will receive the first iPad assessment at the 1 month well-child visit. iPad assessments will be used to: 1) connect families to public health services/programs; 2) screen for social determinants of health and; 3) assess adverse health behaviors that affect the baby's growth and development.
Health Coaching with families of high-risk infants	Health Coaches will focus on goals to encourage healthy weight gain and development. Those eligible for health coaching include: 1) mothers identified as being at high risk for obesity during pregnancy, 2) infants crossing 2+ percentiles since 1 month, and 3) infants >97.7th percentile.

Save the Dates & Timeline

- March 7, 2017: Healthy Eating Research Webinar on Infant and Toddler Feeding Guidelines (Register [here](#).)
- March 20, 2017: Pediatric Program Launch at MGH Chelsea and Revere
- May 15, 2017, 2:00 - 5:00 PM: Collective Impact Meeting, MGH Revere Sweet Conference Room

First 1,000 Days Text Messaging Campaign

The text messaging campaign is intended to keep the First 1,000 Days goals present in the minds of the women involved in the program and to encourage behavioral changes. About one-half of women have opted into our pregnancy text messaging program to date!

First 1,000 Days Patient Navigators have received positive feedback on the text messages women receive during their pregnancy. Check out some of their statements below and examples of text messages we have planned for the Pediatric Program!

"I find the 1,000 Days Program's text messaging to be extremely helpful and insightful. I've learned a lot of things I didn't know before so I really appreciate having that."

"Los mensajes de texto son un buen ayud[a] Me gusta recibir la información de tomar agua y así." ["The text messages are a great help. I like receiving information on drinking water and topics like that."]

1000Days: How to know when to stop feeding? A baby with a full tummy may push away, stop sucking, extend or relax legs, arms, or fingers, or just fall asleep.

1000Days: Put your baby to bed sleepy, but awake. This helps babies learn to fall asleep on their own without the extra comfort of rocking, holding, or nursing.

1000Days: Babies do best with lots of time for playing and talking. Encourage your partner and others to enjoy time with baby too!

Pregnancy Program Update

Since the program launch on August 9, 2016, at the MGH Chelsea and Revere HealthCare Centers and DotHouse Health, 428 women and 62 partners have completed the initial intake.¹ The table below shows selected information gathered from the maternal screeners by health center.

	MGH Revere	MGH Chelsea	DotHouse Health	Total
Intake Visits Completed	185	271	95	597
Screeners Completed	173 (94%)	210 (77%)	45 (54%)	428 (79%)
Patient Navigation ²				
Calls Completed	73 (42%)	106 (50%)	30 (67%)	209 (49%)
Resource Page Sent via Mail/Email ³	138 (96%)	178 (97%)	30 (100%)	346 (97%)
Women signed up for texting	81 (47%)	90 (43%)	20 (44%)	191 (45%)
Women identified as high-risk at 16-20 weeks gestation ⁴				
BMI ≥ 30	53 (65%)	64 (72%)	10 (91%)	127 (70%)
Excess gestational weight gain at 16-20 weeks	29 (35%)	25 (28%)	1 (9%)	55 (30%)

¹ Participants as of February 27, 2017.

² Percentages are calculated from the number of women who completed screeners at the intake visits, unless otherwise indicated.

³ Percentages calculated out of 144 for Revere, 184 for Chelsea and 30 for DotHouse. Women were excluded if they discontinued OB care or if Patient Navigators are currently working on calling them.

⁴ Percentages calculated out of 182 women in total identified as being early high-risk at 16-20 weeks gestation.

Spotlight!

Learn about what else is happening in the area of early life child development and obesity prevention from experts in the field. If you have a "spotlight" to share for a future newsletter, please contact Etna Tiburcio, etiburcio@mgh.harvard.edu.



MGH Revere Project Bread Collaboration

The MGH Revere HealthCare Center is partnering with Project Bread to launch a pilot program to address food insecurity. The program will screen families in the Pediatrics and Med/Peds departments and will connect families with Project Bread advocates. Advocates pre-screen and enroll families in the SNAP program, connect families with emergency food programs and other food resources such as WIC, school meals and more. The program will be rolling out in the OB department in the coming weeks. We are excited to work with you!



Congratulations, Elsie Taveras, MD, MPH!

This month, Elsie Taveras, MD, MPH was promoted to Professor of Pediatrics at Harvard Medical School and was appointed as the next Executive Director of the Kraft Center for Community Health. "The mission of the Kraft Center is very much aligned with my own beliefs that a person's income and zip code should not determine their health or the care they receive," said Dr. Taveras. "We look forward to continuing to implement this mission over the coming years." Congratulations on two great achievements!

MGH Chelsea Healthy Families America (HFA)

The MGH Chelsea HealthCare Center Healthy Families America (HFA) Program was recently accredited for Quality Service by Prevent Child Abuse America, the leading national child abuse prevention organization. HFA is one part of the two-pronged Healthy Beginnings program at MGH Chelsea. The Chelsea HFA program has been acknowledged as a provider of high-quality home visiting services to empower mothers in a culturally appropriate manner to help them find effective solutions and reduce parental stress, strengthen parent-child relationships, promote healthy childhood growth and development and enhance family functioning by reducing risk and building protective factors.



Healthy Eating Research

Building evidence to prevent childhood obesity

Feeding Guidelines for Infants and Young Toddlers: A Responsive Parenting Approach

An expert panel convened by *Healthy Eating Research*, a national program of the Robert Wood Johnson Foundation, released a report of guidelines based on evidence related to responsive parenting practices. The report focuses on evidence-based recommendations for promoting healthy nutrition and feeding patterns for infants and toddlers from birth to 2 years of age. These guidelines can be used by parents, caregivers and staff from programs such as WIC to give proper infant and toddler feeding advice. A full report of the guidelines can be downloaded [here](#). A copy of the executive summary can be accessed [here](#).

Contact us!

Elsie Taveras, MD, MPH: elsie.taveras@mgh.harvard.edu | Derri Shtasel, MD, MPH: dshtasel@partners.org
Tiffany Blake-Lamb, MD, MSc: tblakelamb@partners.org | Meghan Perkins, MPH: meperkins@mgh.harvard.edu
Alexy Arauz Boudreau, MD, MPH: aaruaz@mgh.harvard.edu | Brianna Roche: broche@partners.org
Etna Tiburcio, MPH: etiburcio@mgh.harvard.edu