

State Home Visiting Programs Policy Statement

POSITION

ASTHO supports maternal, infant, and early childhood home visiting programs. These programs are critical to promote healthy child development and improve health outcomes for children, women, and families.

BACKGROUND

Decades of research demonstrate that home visiting programs improve child and family outcomes and are cost-effective,¹ leading to improvements in breastfeeding and interbirth intervals, reduced prenatal substance use, reduced child injuries, increased household income and employment, and increased service identification and referrals.² Home visiting provides families with a support system and connects them to high-quality child care, primary healthcare, and other needed services. Evidence-based home visiting programs are an effective method to deliver preventive health and social services to individuals at high risk for negative health and developmental outcomes,³ and to address disparities in health outcomes.

The Maternal, Infant and Early Childhood Home Visiting Program (MIECHV), Sec. 2951 of the Patient Protection and Affordable Care Act (P.L. 111-148), created a new section of the Title V Maternal and Child Health Services (MCH) Block Grant authorizing grants for states to deliver services through early childhood home visiting programs.⁴ State-based home visiting programs not administered by health agencies are overseen by departments of children’s or family services, early learning, human services, and governors’ offices.⁵ The funding focuses on six benchmark areas: improved maternal and newborn health; reduced child injuries, abuse, and neglect; improved school readiness and achievement; reduced crime or domestic violence; improved family economic self-sufficiency; and improved service coordination and referrals for other community resources and support.⁶ The MIECHV program was reauthorized in February 2018 through FY22 at a funding level of \$400 million per year.

Summary of Recommendations:

- Ensure appropriate federal and state funding for sustainable state home visiting programs.
- Integrate home visiting programs with existing maternal and child health (MCH) services and social and medical programs to provide comprehensive care for families and children.
- Build an integrated early childhood data system between public health, healthcare, communities, and education sectors.
- Create a statewide referral system to connect families with relevant resources and support.
- Support quality improvement and program evaluation to demonstrate program effectiveness and cost savings.
- Identify, adopt, and support promising practices to address a wide variety of family and child needs.
- Enhance home visiting workforce capacity by recruiting, training, and retaining home visitors.
- Utilize community health workers to connect and assist families with home visiting services.
- Build public awareness to increase public will and broad support for home visiting programs.

RECOMMENDATIONS/EVIDENCE-BASE

ASTHO recommends the following policy considerations for State Home Visiting Programs:

- Ensure appropriate federal and state funding and leverage resources for the sustainability of state home visiting programs. MIECHV is the largest source of funding for home visiting programs, funding over \$2.5 billion to MIECHV grantees in all 50 states, the District of Columbia, five jurisdictions and tribal organizations, and non-profits between FY10 and FY17.⁷ Other funding sources include Title V MCH block grant funds, Temporary Assistance for Needy Families (TANF) funds, Early Intervention for Partnerships Program funds, and state tobacco taxes or tobacco settlement proceeds. In some states, home visiting programs are supported by private grants,⁸ and Medicaid funding may also be used.⁹
- Integrate and coordinate home visiting with MCH services and social and medical programs, such as Medicaid, Title V MCH Block Grant, Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Title X Family Planning, services to children with special healthcare needs, and with approaches that address the social determinants of health and encourage strong social and emotional supports for families, infants, and young children. States and territories have had success incorporating existing and emerging MCH priorities into MIECHV and other home visiting programs.¹⁰ Almost all MIECHV state grantees show improvement in family economic self-sufficiency as well as coordination and referrals for other community resources and supports,¹¹ including substance use screenings and referrals for adult participants¹² and mobilizing to assist with Zika education and prevention activities, including distribution of prevention supplies, such as mosquito nets, and connecting affected families with resources.^{13,14} Two-thirds of MIECHV programs report having referral agreements with WIC, hospitals, schools, child welfare agencies, prenatal clinics, and health departments.¹⁵
- Align longitudinal and integrated early childhood data systems. MIECHV requires extensive data collection, giving states the opportunity to align with other data systems related to early childhood to develop common outcomes, indicators, and benchmarks. Implement tools to streamline data systems to better identify pregnant women and families who could benefit from support services and guide referral services. Families receiving home visiting services often have complex needs and face challenges navigating multiple programs and systems. When programs collaborate and have strong referral systems in place or a centralized intake process, families are more likely to get the full range of services while maximizing efficiency and avoiding duplication.
- Support rigorous quality improvement (QI) and program evaluation to demonstrate effectiveness and cost savings or neutrality. The MIECHV program is specifically designed to focus on performance measurement and continuous QI. Grantees are required to show measurable improvements across at least four of the six benchmark areas, each with multiple measurable indicators.¹⁶ There is also federal support and technical assistance for states to collect data and evaluate their MIECHV projects.¹⁷ While most state funds under the MIECHV program must be spent on evidence-based home visiting models, states may spend up to one-quarter of their funds on promising practices and their evaluation.
- Strengthen the current and future home visiting workforce by recruiting, training, and retaining staff and supporting leaders during transition and succession planning. State MIECHV programs have identified and are collaborating with partners to meet a variety of needs related to building a strong home visiting workforce, such as developing core competencies and professional development systems, joint training opportunities, and specialized credentials.¹⁸ Using culturally competent integrators and navigators, such as community health workers, to connect families to home visiting services is effective at improving MCH outcomes by encouraging women to pursue recommended care, including cancer screenings, and increasing child vaccinations and promoting nutrition.¹⁹
- Leverage MIECHV to ensure that state and local agencies and programs working on early childhood can collaborate and coordinate activities and priorities that promote family health

and early childhood development. This collaboration is particularly important for maximizing public investments across sectors to develop strong systems to support early childhood.

- Build public awareness, messaging, and education to increase public will and support for home visiting programs. Raising public awareness about the impact of home visiting programs can build a broader constituency that supports home visiting programs and helps to ensure they continue in the future.²⁰

APPROVAL DATES

Population Health & Informatics Policy Committee Approval: May 3, 2018

Board of Directors Approval: December 5, 2018

Policy Expires: December 31, 2021

Expiration Date Extension Due to COVID-19: December 31, 2022

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ASTHO membership supported the development of this policy, which was subsequently approved by the ASTHO Board of Directors. Be advised that the statements are approved as a general framework on the issue at a point in time. Any given state or territorial health official must interpret the issue within the current context of his/her jurisdiction and therefore may not adhere to all aspects of this Policy Statement.

¹ Department of Health and Human Services, Administration for Children and Families, and Health Resources and Services Administration Maternal and Child Health. “The Maternal, Infant, and Early Childhood Home Visiting Program: Partnering with Parents to Help Children Succeed.” Available at <https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/HomeVisiting/pdf/programbrief.pdf>. Accessed 11-27-2017.

² Administration for Children and Families, Department of Health and Human Services, and Health Resources and Services Administration Maternal and Child Health. *Demonstrating Improvement in Maternal, Infant, and Early Childhood Home Visiting Program: A Report to Congress, March 2016*. Available at <https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/HomeVisiting/pdf/reportcongress-homevisiting.pdf>. Accessed 11-29-2017.

³ Stoltzfus E, Lynch KE. “Home Visitation for Families with Young Children.” *Congressional Research Service*. 2009. Available at <http://www.preventchildabusesb.org/crshomevisitreportoct2009.pdf>. Accessed 11-27-2017.

⁴ Patient Protection and Affordable Care Act, Pub. L. No. 111-148, §2702, 124 Stat. 119, 318-319 (2010).

⁵ Health Resources and Services Administration Maternal and Child Health. “Maternal, Infant, and Early Childhood Home Visiting Program FY17 Formula Funding Awards.” Available at <https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting/fy17-home-visiting-awards>. Accessed 11-27-2017.

⁶ Health Resources and Services Administration Maternal and Child Health. “Home Visiting.” Available at <https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting-overview>. Accessed 11-27-2017.

⁷ Fernandes-Alcantara AL. “Maternal and Infant Early Childhood Home Visiting (MIECHV) Program: Background and Funding.” *Congressional Research Service*. 2016. Available at [https://greenbook-waysandmeans.house.gov/sites/greenbook.waysandmeans.house.gov/files/R43930%20-%20Maternal%20and%20Infant%20Early%20Childhood%20Home%20Visiting%20\(MIECHV\)%20-%20Background%20and%20Funding.pdf](https://greenbook-waysandmeans.house.gov/sites/greenbook.waysandmeans.house.gov/files/R43930%20-%20Maternal%20and%20Infant%20Early%20Childhood%20Home%20Visiting%20(MIECHV)%20-%20Background%20and%20Funding.pdf). Accessed 11-27-2017.

⁸ Herzfeldt-Kamprath R, Calsyn M, Huelskoetter T. “Medicaid and Home Visiting: Best Practices from the States.” 2017. Available at <https://www.americanprogress.org/issues/early-childhood/reports/2017/01/25/297160/medicaid-and-home-visiting/>. Accessed 11-27-2017.

⁹ *ibid*

¹⁰ National Institute for Children’s Health Quality. “States Use Home Visiting Programs to Spread Safe Sleep Messages.” Available at <https://www.nichq.org/insight/states-use-home-visiting-programs-spread-safe-sleep-messages>. Accessed 11-27-2017.

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- ¹¹ Administration for Children and Families, Department of Health and Human Services, and Health Resources and Services Administrations Maternal and Child Health. *Demonstrating Improvement in Maternal, Infant, and Early Childhood Home Visiting Program: A Report to Congress, March 2016*. Available at <https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/HomeVisiting/pdf/reportcongress-homevisiting.pdf>. Accessed 4-14-2018.
- ¹² Department of Health and Human Services, Administration for Children and Families, and Health Resources and Services Administration Maternal and Child Health. "The Maternal, Infant, and Early Childhood Home Visiting Program: Partnering with Parents to Help Children Succeed." Available at <https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/HomeVisiting/pdf/programbrief.pdf>. Accessed 11-27-2017.
- ¹³ Florida Maternal Infant and Early Childhood Home Visiting Initiative. "Zika 101 Provides Information for FL Home Visitors." Available at <http://www.flmiechv.com/zika-101-provides-information-for-fl-home-visitors/>. Accessed 11-29-2017.
- ¹⁴ Health Resources and Services Administration Maternal and Child Health. "Helping People Affected by Zika: MCHB's Response." Available at <https://www.hrsa.gov/sites/default/files/hrsa/zika/mchb-factsheet.pdf>. Accessed 11-29-2017.
- ¹⁵ MDRC. "What Are Home Visiting Programs Doing? Mother and Infant Home Visiting Program Evaluation (MIHOPE): Informing the Future of Home Visiting." Available at <https://www.mdrc.org/what-are-home-visiting-programs-doing>. Accessed 4-14-2018.
- ¹⁶ Administration for Children and Families, Department of Health and Human Services, and Health Resources and Services Administrations Maternal and Child Health. *Demonstrating Improvement in Maternal, Infant, and Early Childhood Home Visiting Program: A Report to Congress, March 2016*. Available at <https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/HomeVisiting/pdf/reportcongress-homevisiting.pdf>. Accessed 11-29-2017.
- ¹⁷ Administration for Children and Families, Office of Planning, Research, and Evaluation. "Grantee-Led Evaluations: The Maternal, Infant, and Early Childhood Home Visiting Program – Overview and Profiles." Available at <https://www.acf.hhs.gov/opre/resource/grantee-led-evaluations-maternal-infant-early-childhood-home-visiting-program-overview-profiles>. Accessed 4-14-2018.
- ¹⁸ Zero to Three Policy Center. "The MIECHV Program: Smart Investments Build Strong Systems for Young Children." Available at <https://www.zerotothree.org/resources/171-the-miechv-program-smart-investments-build-strong-systems-for-young-children>. Accessed 4-14-2018.
- ¹⁹ Association of State and Territorial Health Officials. "Utilizing Community Health Workers to Improve Access to Care for Maternal and Child Populations: Four State Approaches." Available at <http://www.astho.org/Maternal-and-Child-Health/AIM-Access-CHW-Issue-Brief/>. Accessed 6-14-2018.
- ²⁰ Zero to Three Policy Center. "Community Engagement and Public Awareness in Early Childhood Systems." Available at <https://www.zerotothree.org/resources/1633-community-engagement-and-public-awareness-in-early-childhood-systems>. Accessed 4-14-2018.