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SUPPORTING MIECHV REAUTHORIZATION:

Reflections for Measurement, Evaluation, and Program Development

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SUPPORTING MIECHV REAUTHORIZATION

The Institute for Child Success (ICS) supports the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program to better the lives of generational families and communities with young children. The evidence shows home visiting programs have a positive impact on child and parent outcomes. They provide unique cultural and equity focused resources and services across states, regions and urbanicity (1), and do so through cost-effective (2) place-based services (3) delivered in every state. Thus, continued financial support is a critical investment that will allow states to continue to scale and grow evidence-based programs to meet the expanding post-pandemic needs across states and territories.

The evidence base for home visiting

Research focused on home visiting programs' theory of impact, and children and families' lived experiences, have shown to have the greatest impact on parent outcomes. Home visiting programs have been found to improve maternal health, as well as self-sufficiency and life course outcomes (4). Home visiting programs have also shown potential to improve parenting behaviors and the quality of parent-child relationships (5). Although there is inconsistent evidence that home visiting programs can reduce child maltreatment (6), many programs do in fact yield improvements in parenting behaviors related to maltreatment (7).

Furthermore, participation in home visiting programs has led to improved child school readiness (8) and child development (9) as the early learning field has moved to leverage home visiting as a service delivery mode to contribute to participant children's school readiness, literacy skills, and other areas of academic and cognitive achievement. It has been documented that home visitation may lead to improvements in literacy outcomes if the programs are focused on child development and parenting practices (10).

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The literature on home visitation has moved beyond the question of whether or not programs are effective, to a consideration of the mechanisms of effectiveness with special consideration for implementation and implementers. For instance, considerable research has been done to understand the health and wellbeing of home visitors (11). Home visitor well-being has been shown to have an impact on quality of services provided to families and staff burn-out and program sustainability. (12)

For home visiting to continue to meet the needs of hundreds of thousands of US children and families each year, we must continue to empower programs to work with research and evaluation partners to develop their own evidence base. Through research partnerships, science and practice can unite to leverage implementation and evaluation strategies to develop HomVEE (Home Visiting Evidence of Effectiveness)-informed evaluations. These evaluations can 1.) Build the evidence base in caregiver, child, and program-level outcomes 2.) Seek MIECHV funding to increase quality services to children and families.

MIECHV Programs' Measurable Outcomes

CHILD HEALTH
Physical health, nutrition, use of health care system

CHILD DEVELOPMENT AND SCHOOL READINESS
Social-emotional, psychological, cognitive, or academic development, attachment to caregiver, mental and behavioral health

FAMILY ECONOMIC SELF-SUFFICIENCY
Income and earnings, means tested public assistance, housing, food, transportation, employment, education, health insurance, child support programs

LINKAGES AND REFERRALS
Connections to early intervention, child care, public benefits programs

REDUCTIONS IN CHILD MALTREATMENT
Substantiated cases of abuse, neglect, or confirming medical records

REDUCTIONS IN JUVENILE DELINQUENCY, FAMILY VIOLENCE, OR CRIME
Interactions with the justice system by mother or child that received home visiting

MATERNAL HEALTH
During or after pregnancy including mental, behavioral and physical health and measure of social supports

POSITIVE PARENTING PRACTICES
Parent knowledge of child development and parenting behaviors

MIECHV programs promote two-generation equitable access to health and human services

The programs continue to address issues of systemic and generational equity, particularly among MIECHV-identified priority populations. The evidence suggests these families are at a greater risk for experiencing individual and systemic imposed trauma. To break the cycle of generational trauma, MIECHV authorized programs seek to provide two-generation supports that promote positive outcomes for both caregivers and children, targeted at their individual circumstances, life stage, and location. MIECHV networks such as the Health Equity Collaborative have developed an evidence-informed framework to advance health equity in home visiting. The framework includes making health equity a strategic priority, developing antiracist infrastructure that centers families' lived experience and community context, antiracist service delivery and linkages, and continuous quality improvement (13). Through conscious commitment, MIECHV programs are positioned and committed to breaking the cycle of racism, poverty, and generational trauma.

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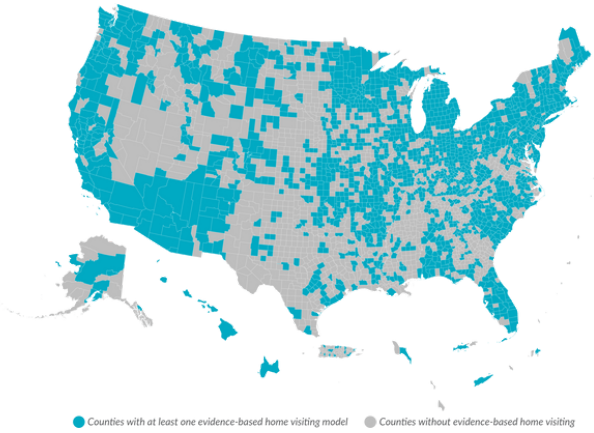
Families with one of the following characteristics receive MIECHV Priority Family Designation:

- Household income below federal poverty level
- Pregnant women under 21 years of age
- History of child maltreatment/prior involvement with the child welfare system
- History of substance abuse/substance abuse treatment
- Current tobacco use in the home
- Children with low academic achievement
- Children with developmental delays or disabilities
- Retired or active military families

MIECHV programs consistently demonstrate cost-effective administration and delivery in every state, by every state

Counties with at least one local agency delivering evidence-based home visiting (2020)

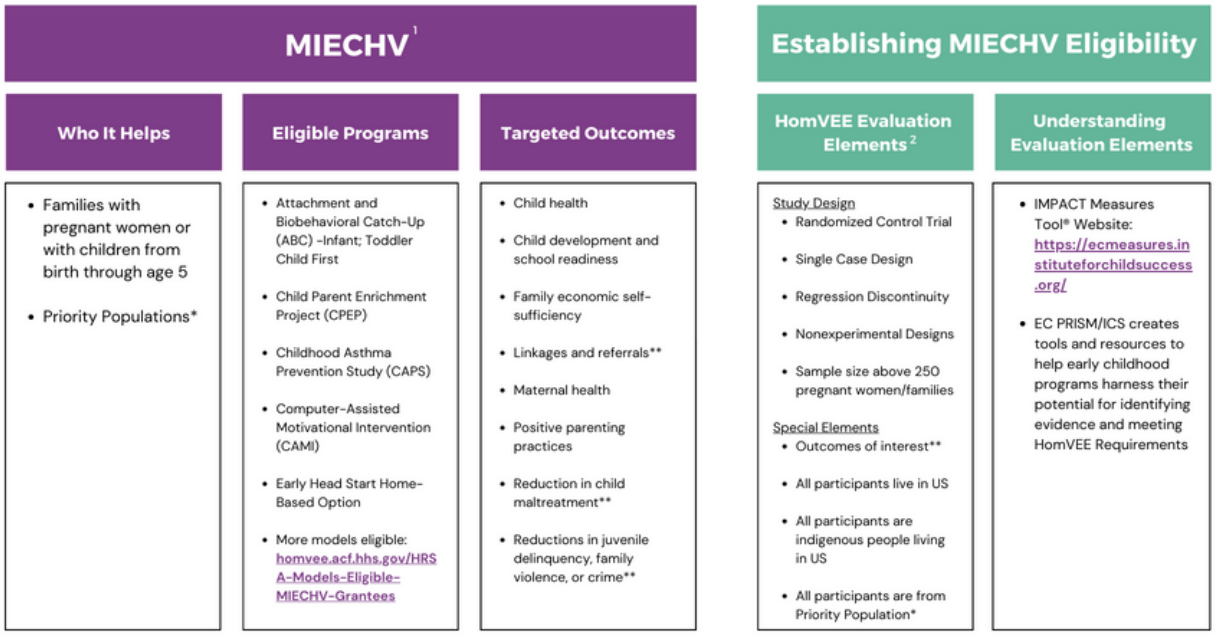


Source: National Home Visiting Resource Center

The National Home Visiting Resource Center 2022 Yearbook reported evidence-based home visiting was implemented in all 50 states, the District of Columbia, 5 territories, 22 tribal communities, and 54 percent of U.S. counties. In that year, more than 275,000 families received evidence-based home visiting services. MIECHV helped fund home visiting for more than 71,000 of those families across these states, territories, and tribal communities. It is clear the need for home visiting exceeds services available through MIECHV funding. Reauthorization funding will support the continuation and expansion of evidence-based programs. Promoting these outcomes for infants, toddlers, preschoolers and their families across the country, is a measurable cost savings to address the impact of childhood trauma.

How programs can become MIECHV eligible

To meet the growing demand for home visiting services, many existing programs seek MIECHV funding for their programs. The U.S Department of Health and Human Services (HHS) criteria for MIECHV funding is that programs demonstrate they are evidence-based through a rigorous scientific evaluation. Currently, the HomVEE review determines which home visiting models have enough evidence to meet this criteria. Like all evidence-based journeys, it begins with practitioners harnessing their power to articulate specific implementation practices and develop an evaluation plan that highlights those programmatic elements. This is called a theory of impact, and it is critical for the success of home visiting programs and MIECHV funding.



Expanding funding for evidence-based home visiting could not come at a more critical time for children and families. This funding is critical for continued services to our youngest and most vulnerable children and families, to break generational trauma circles, to promote racial equity, and to support the workforce that is supporting the next generation.

Please support the bipartisan Jackie Walorski Maternal and Child Home Visiting Reauthorization Act: (oneclickpolitics.global.ssl.fastly.net)

Connect with us!

We support practitioners and programs on their MIECHV evaluation journey.

- Join our mailing list to receive updates about new measures and resources: **http://ecmeasures.instituteforchildsuccess.org/join**
- Email us at **ecprism@instituteforchildsuccess.org**
- Find us on social media at **@ecprism** and **@Child_Success**

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