

The Positive Impact of

Maternal, Infant, and Early Childhood Home Visiting (MIECHV) in Nebraska



MIECHV provides federal funds to states, territories, and tribal entities for voluntary, evidence-based home visiting services. Home visitors meet with parents one on one from pregnancy through their child's kindergarten entry to help lay the foundation for the health, education, development, and economic self-sufficiency of the entire family. Visits by caring, experienced professionals who provide families support and connections to needed resources and services can help families leverage their strengths so they can thrive.

Since 2013, MIECHV has been level-funded at \$400 million annually and pre-pandemic estimates showed MIECHV reached only 3-5% of eligible families nationwide. As MIECHV is set to expire on September 30, 2022, reauthorization offers Congress the opportunity to provide additional investments

that will enable home visiting programs to reach more families. The National Home Visiting Coalition, of which FFYF is a member, recommends a five-year reauthorization that would increase funding by \$200 million annually (reaching \$1.4 billion in FY2027); doubling the MIECHV tribal set-aside from 3% to 6% to reach more families in American Indian and Alaska Native communities; and continuing to allow virtual home visiting implemented with model fidelity as a service delivery option for families who choose it.

In FY21:

\$1,260,897

was awarded to the Nebraska
Department of Health and Human
Services¹

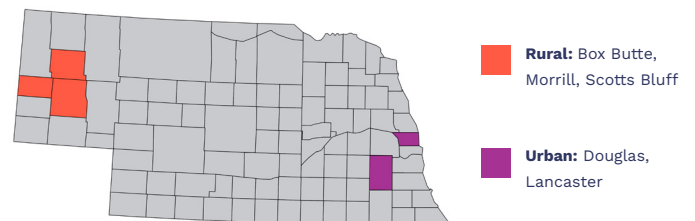
Within Nebraska, MIECHV provided/served:*

228 families

4,231 home visits

213 children

Nebraska MIECHV Program At-a-Glance



Evidence-based models providing
MIECHV-supported home visiting
services in Nebraska include:[^]



Nebraska Performance Highlights:[^]



- ◆ **95.9%** of children enrolled in home visiting had a family member who read, told stories, and/or sang with them on a daily basis
- ◆ **94.7%** of mothers enrolled in home visiting received a postpartum visit with a healthcare provider within 8 weeks of delivery
- ◆ **94.3%** of infants enrolled in home visiting were always placed to sleep on their backs, without bed-sharing or soft bedding

Family Needs[^]

States tailor their programs to meet community needs, with priority given to certain populations listed in the law.

In Nebraska:

- ◆ **62.7%** of households were low income
- ◆ **31.1%** of households reported a history of substance abuse
- ◆ **15.8%** of households reported a history of child abuse or maltreatment

Nebraska Families Receiving Home Visiting

Race*

- White (68%)
- Black (10%)
- Multiple (8%)
- American Indian/Alaska Native (10%)



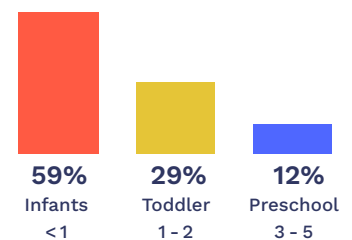
To protect confidentiality, race categories with less than 10 respondents have been omitted. Percentages may not add to 100%

Ethnicity*

26%

Hispanic or Latino

Child's Age*

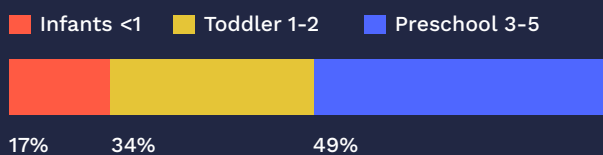


Potential Beneficiaries:

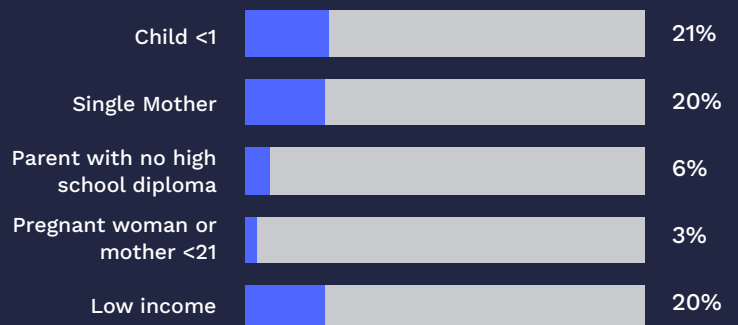
In Nebraska, an estimated 119,100 families could benefit from home visiting with sufficient funding.*

- ◆ **46%** of families met one or more priority criteria.
- ◆ **18%** of families met two or more priority criteria.

153,800 children could benefit from home visiting with sufficient funding.*



The estimated percentage of families who could benefit in Nebraska met the following priority criteria:*



References: National Home Visiting Resource Center (NHVRC) 2021 Yearbook, MIECHV State Data Tables (FY2020) (*), HRSA Home Visiting Program Fact Sheets (*)