

The Positive Impact of

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



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:

\$10,071,848

was awarded to the Washington State Department of Children, Youth, and Families¹

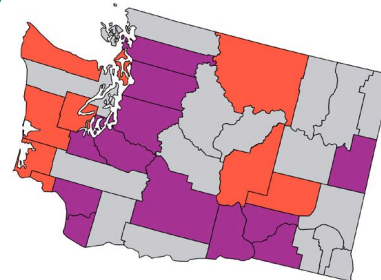
Within Washington, MIECHV provided/served:*

1,578 families

17,091 home visits

1,617 children

Washington MIECHV Program At-a-Glance



- Rural:** Adams, Clallam, Grant, Grays Harbor, Island, Mason, Okanogan, Pacific, Wahkiakum
- Urban:** Benton, Clark, Cowlitz, Franklin, King, Pierce, Skagit, Snohomish, Spokane, Thurston, Walla Walla, Yakima

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



Parents as Teachers



Washington Performance Highlights:[^]

- ◆ **84.6%** of caregivers were asked if they had any concerns regarding their child's development, behavior, or learning in their postpartum home visit
- ◆ **79.3%** of children enrolled in home visiting had a family member who read, told stories, and/or sang with them on a daily basis
- ◆ **Reflective Practices Training Portfolio:** Local programs accessed online programming provided by Washington's Infant Mental Health partners, including: reflective supervision training and supervisor consultation groups; home visitor trainings and peer practice opportunities; relationship-based team practices and virtual visits implementation support



Family Needs[^]

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

In Washington:

- ◆ **64.1%** of households were low income
- ◆ **40.3%** of households included a child with developmental delays or disabilities
- ◆ **11.1%** of households included a pregnant enrollee under age 21

Washington Families Receiving Home Visiting

Race*

- White (64%)
- Black (11%)
- Asian (2%)
- Multiple (12%)
- American Indian/Alaska Native (10%)
- Native Hawaiian/Pacific Islander (2%)



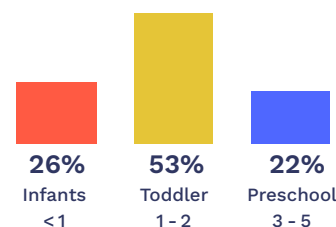
To protect confidentiality, race categories with less than 10 respondents have been omitted. Percentages may not add to 100%

Ethnicity*

Child's Age*

49%

Hispanic or Latino

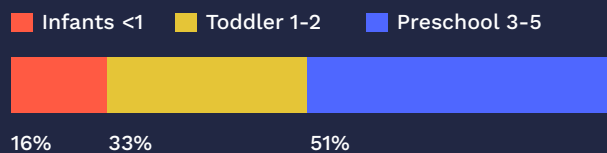


Potential Beneficiaries:

In Washington, an estimated 428,000 families could benefit from home visiting with sufficient funding.*

- ◆ **44%** of families met one or more priority criteria.
- ◆ **15%** of families met two or more priority criteria.

532,700 children could benefit from home visiting with sufficient funding.*



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

