

The Positive Impact of

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



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:

\$5,889,379

was awarded to the West Virginia
Department of Health and Human
Resources¹

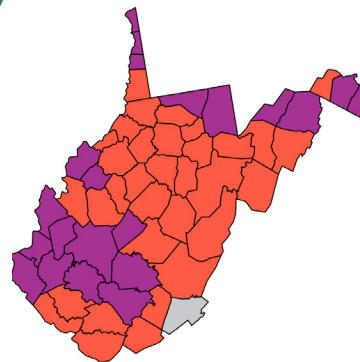
Within West Virginia, MIECHV provided/
served:*

1,573 families

19,784 home visits

1,964 children

West Virginia MIECHV Program At-a-Glance



- Rural:** Barbour, Braxton, Calhoun, Doddridge, Gilmer, Grant, Greenbrier, Hardy, Harrison, Jackson, Lewis, Logan, Marion, Marshall, Mcdowell, Mercer, Mingo, Morgan, Nicholas, Pendleton, Pleasants, Pocahontas, Randolph, Ritchie, Roane, Summers, Taylor, Tucker, Tyler, Upshur, Webster, Wetzell, Wyoming
- Urban:** Berkeley, Boone, Brooke, Cabell, Clay, Fayette, Hampshire, Hancock, Jefferson, Kanawha, Lincoln, Mason, Mineral, Monongalia, Ohio, Preston, Putnam, Raleigh, Wayne, Wirt, Wood

Evidence-based models providing MIECHV-supported home visiting services in West Virginia include: ^



West Virginia Performance Highlights:[^]



- ◆ **95.6%** of caregivers enrolled in home visiting were screened for intimate partner violence within 6 months of enrollment
- ◆ **92.5%** of caregivers enrolled in home visiting were screened for depression within 3 months of enrollment or within 3 months of delivery
- ◆ **89.7%** of children enrolled in home visiting had a family member who read, told stories, and/or sang with them on a daily basis

Family Needs[^]

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

In West Virginia:

- ◆ **61.1%** of households were low income
- ◆ **27.6%** of households included someone who used tobacco products in the home
- ◆ **22.3%** of households included a child with developmental delays or disabilities

West Virginia Families Receiving Home Visiting

Race*

- White (94%)
- Black (3%)
- Multiple (3%)

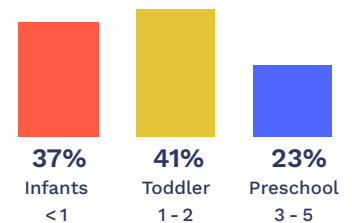


To protect confidentiality, race categories with less than 10 respondents have been omitted. Percentages may not add to 100%

Ethnicity*

2%
Hispanic or Latino

Child's Age*

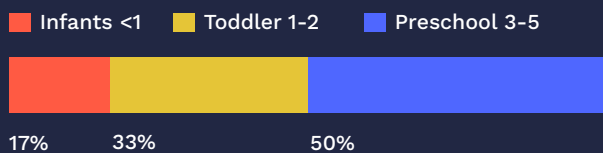


Potential Beneficiaries:

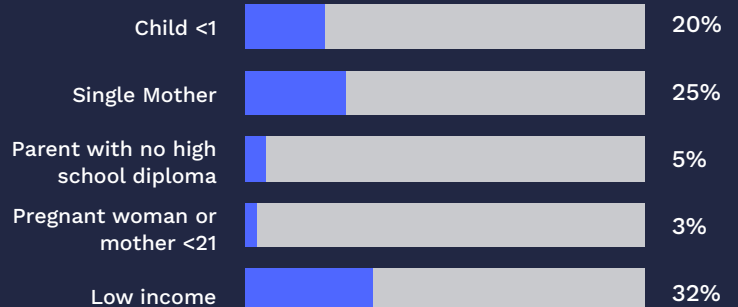
In West Virginia, an estimated 88,200 families could benefit from home visiting with sufficient funding.*

- ◆ **54%** of families met one or more priority criteria.
- ◆ **23%** of families met two or more priority criteria.

114,100 children could benefit from home visiting with sufficient funding.*



The estimated percentage of families who could benefit in West Virginia 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 (*)