

The Positive Impact of

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



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.

California MIECHV Program At-a-Glance



- Rural:** Humboldt, Nevada, Tehama
- Urban:** Alameda, Butte, Contra Costa, Fresno, Imperial, Kern, Los Angeles, Madera, Merced, Riverside, Sacramento, San Diego, San Francisco, San Mateo, Shasta, Solano, Sonoma, Stanislaus, Yolo

In FY21:

\$19,028,270

was awarded to the California Department of Public Health¹

Within California, MIECHV provided/
served:*

2,684 families

26,997 home visits

2,166 children

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



California Performance Highlights:[^]



- ◆ **91.3%** of caregivers were asked if they had any concerns regarding their child's development, behavior, or learning in postpartum home visits
- ◆ **89.5%** of children enrolled in home visiting had a timely screen for developmental delays
- ◆ **89.2%** of caregivers enrolled in home visiting had continuous health insurance coverage for at least 6 consecutive months

Family Needs[^]

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

In California:

- ◆ **71.3%** of households were low income
- ◆ **22.3%** of households reported a history of child abuse or maltreatment
- ◆ **15.2%** of households included a pregnant enrollee under age 21

California Families Receiving Home Visiting

Race*

- White (65%)
- Black (16%)
- Asian (7%)
- Multiple (8%)
- American Indian/Alaska Native (4%)
- Native Hawaiian/Pacific Islander (<1%)



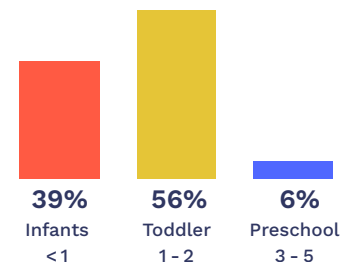
To protect confidentiality, race categories with less than 10 respondents have been omitted. Percentages may not add to 100%

Ethnicity*

59%

Hispanic or Latino

Child's Age*

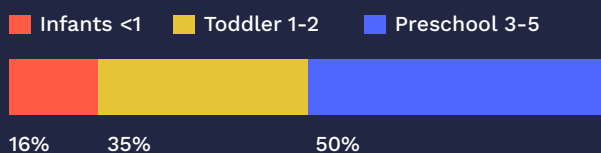


Potential Beneficiaries:

In California, an estimated 2,131,800 families could benefit from home visiting with sufficient funding.*

- ◆ **49%** of families met one or more priority criteria.
- ◆ **19%** of families met two or more priority criteria.

2,837,500 children could benefit from home visiting with sufficient funding.*



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

