



HOME
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MIECHV Reauthorization

Maternal, Infant, and Early Childhood Home Visiting Program Reauthorization: Priorities to Expand and Improve Equity for Families

Home visiting programs serve as a critical link of support for families, helping magnify parental skills, promote optimal child health and development, and connect families to a range of available supportive services. The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program serves as an equity accelerator by fostering relationships that enable home visitors to provide supports based on the specific needs and goals of individual families.

The benefits of MIECHV-funded home visiting include but are not limited to promoting interventions to improve maternal and infant health; creating connections between mothers, the pediatric medical home, and other health practitioners in the community; providing screening for perinatal depression and connecting parents with appropriate community-based behavioral health care; supporting families in their child's early development and learning; providing referrals when certain risk factors, including trauma or domestic violence, are present in the home; providing resources for children who experience trauma and toxic stress; targeting the social determinants of health affecting families, such as social support, parental stress, access to health care, income and poverty status, and environmental conditions; and helping families navigate complex community-based systems of supports.

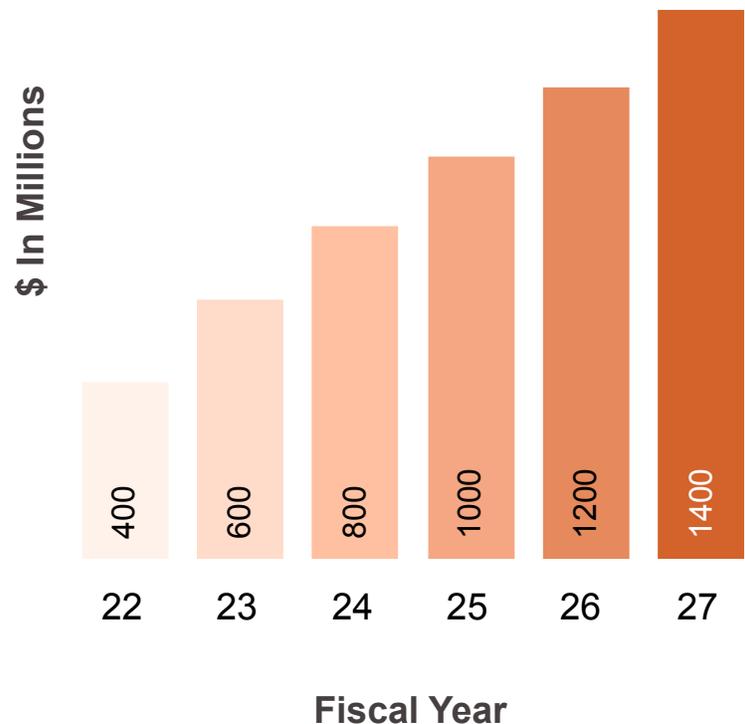
MIECHV expires on September 30, 2022. The Home Visiting Coalition supports a bipartisan reauthorization with the following recommendations:

1) Increase MIECHV funding to reach more families and better support the workforce over the next five years.

MIECHV has been recognized as the gold standard in evidence-based policymaking, yet it has seen diminished spending power over time due to level funding over nearly a decade. Pre-pandemic estimates showed MIECHV reached only three to five percent of eligible families each year, and the impacts of the pandemic have only exacerbated the challenges faced by families across the country. Recent statewide needs assessments have identified additional high-risk communities that would benefit from MIECHV programs, but those programs cannot be established until additional funding is made available. Additionally, home visiting programs frequently identify recruitment, retention, and high turnover of home visitors as one of their key challenges to adequately serve families. Low wages and poor benefits for the field is a main driver of these challenges and additional funding is needed to address workforce challenges and provide competitive wages to these vital providers, the overwhelming majority of whom are women.

To reach more eligible families and better serve the workforce, the Home Visiting Coalition recommends scaling up MIECHV over the next five years with increases of \$200 million annually, arriving at a total of \$1.4 billion.

MIECHV Funding Increase





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2) Double the Tribal set-aside.

Tribal MIECHV provides grants to tribal organizations to develop, implement, and evaluate home visiting programs in American Indian and Alaska Native (AIAN) communities. Tribal MIECHV helps develop and strengthen tribal capacity to support and promote the health and well-being of families through home visiting in tribal communities, and support and strengthen cooperation and linkages between programs that serve tribal children and their families. Long standing inequities within AIAN communities have been significantly amplified by COVID-19.

To address these inequities, the Home Visiting Coalition recommends doubling the tribal set-aside within MIECHV from three percent to six percent to reach more families in AIAN communities.

“The support home visitors provided served as a buffer for some families experiencing a different level of hardship.”

- April Winters, Home Visitor, Taos Pueblo

3) Continue to allow virtual home visiting with model fidelity as an approved option for service delivery.

Policies Congress passed last year that allowed virtual home visits to count as home visits through MIECHV helped families maintain connections without putting their or their home visitor's health at risk. The shift to virtual home visiting removed barriers to the provision of services during the COVID-19 pandemic. Virtual home visiting has demonstrated many additional benefits including greater flexibility in where, how, and when families can receive visits; increased access in areas where vulnerable populations often lack an entrance point to quality maternal, infant, and early childhood programs, including rural and frontier areas; and preventing disruptions due to family illness or inclement weather. The virtual service delivery option improves equity by providing families choice, convenience, and accessibility.

The Home Visiting Coalition recommends that virtual home visiting implemented with model fidelity continue to be an allowable optional service delivery modality for families who choose it, as part of their receipt of comprehensive home visiting services. The Home Visiting Coalition also recommends that reauthorization support continued evaluation of the benefits and opportunities for prospective strengthening of virtual home visiting.

About Us

The Home Visiting Coalition is a diverse group of organizations committed to the well-being of children, working to promote federal support of home visiting to strengthen families in communities across the country. The Home Visiting Coalition grounds its work in promoting the Maternal, Infant, and Early Childhood Home Visiting program (MIECHV), a federal grant program to states, territories, and Tribes that supports evidence-based early childhood home visiting for families from pregnancy through kindergarten entry.