

Home- and community-based parenting support leads to improved outcomes

Kids Count in Michigan | March 2023

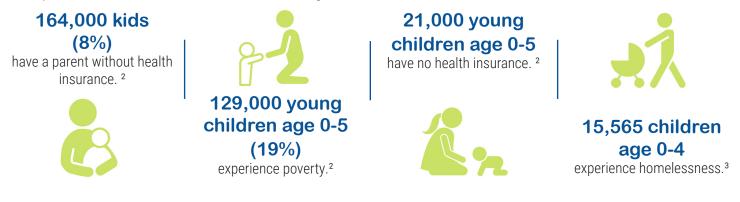
What we know

Home visiting programs are cost-effective prevention strategies that support improved maternal, infant and child outcomes.

Home visiting is a successful prevention strategy that supports pregnant people, families, and babies before, during, and after birth up to age 5. Home visiting programs assist families in caring for children, connecting with services, providing devel-opmental screenings, and building strong, healthy relationships. These cost-effective and evidence-based programs lead to improved outcomes.

Risk factors impact infant and maternal health.

Thirty-six counties and multiple sub-county areas have been identified as places where families face multiple risk factors that impact infant and maternal health outcomes.¹ These areas would especially benefit from home visiting services. Examples of risks to infant and toddler health in Michigan include:



Over 700 babies didn't survive past their first birthday. Black babies faced the highest risks, experiencing infant mortality rates 4 and 3 times that of Asian and White babies, respectively.⁴

Context Matters.

There are variations in the challenges communities face, making local data and context very important. For example, though Allegan County has a higher median income than the state, it also has:

- · Some cities with double the rate of poverty than the state average
- · Farms that attract migrant families that are transient, unaware or fearful of public early childhood services
- High rates of ACEs (Adverse Childhood Experiences) among middle and high school students, high methamphetamine use, and transportation barriers

There is demonstrated need for home visiting in Michigan.

Not only is there need, there is broad **demand**for expansion as one-third of home visiting programs report waiting lists. Of those, four in 10 (41%) had 10 or more families waiting.¹

- Michigan has eight home visiting programs with unique designs and ranges in duration of service.
- In Fiscal Year 2020, 93% of children served were under age 3, including 60% under age one and 33% between one and two years old.⁵
- Services reached 17,763--or 5% of-- infants and toddlers statewide.^{5,6}
- Most families served (63%) were in extreme poverty (less than 50% of the federal poverty level).⁵

Recommendations

To support families with young children through home visiting programs, Michigan should:

Center equity: Make home visiting available and accessible to all families who want to enroll with outreach efforts that share all options and honor family choice and voice.

Maintain and expand funding: Seek inflationary increases for current programs to retain and attract workforce and support expansions where there is unmet demand.

Maximize resources with flexibility: Ensure every available dollar for home visiting including state and federal resources is utilized while adequately investing in necessary system supports such as professional development across all models and programs.



Sources

- 1. Home Visiting Needs Assessment 2020. Michigan Department of Health and Human Services Early Childhood Home Visiting Unit and the Michigan Public Health Institute Center for Healthy Communities, 2020.
- 2. Population Reference Bureau.
- **3.** Poverty Solutions at the University of Michigan.
- 4. Michigan Department of Health and Human Services
- 5. Michigan Home Visiting Report: Public Act 291 of 2012 Legislative Report. Michigan Department of Health and Human Services and Michigan Department of Education, 2020.
- 6. Bridged-Race Population Estimates 1990-2020 Request. Centers for Disease Control and Prevention.

Think Babies Michigan

is a collaborative of more than 2,000 members—leaders, experts, families, organizations and providers—working together to improve the lives of babies prenatally through age 3 in Michigan. Join at: www.ecic4kids.org/policy-thinkbabiesmi.

