Home Visiting Services: July 2018 – June 2019

Home visiting programs are voluntary, family-focused services offered to expectant parents and families with new babies and young children to support the physical, social, and emotional health of your child.

When families receive home-based support, children are better prepared for school, abuse and neglect are less likely and parent-child bonds are stronger.

Either before a child’s birth or the child’s first few years of life, families are voluntarily matched with trained professionals. These home visitors engage families in their homes or community settings to provide information and support related to children’s healthy development, support parent-child relationship, and provide information on importance of early learning and connections to other information, services and supports in the community.

Who we serve:

• More than half (57%) of families served are considered living in extreme poverty

• Among caregivers with less than a high school education, 15% sought additional education

• 1 in 3 primary caregivers are employed full-time or part-time

Children Served by the HVSA

Numbers Served

2,791 Children

2,862 Families

953 Pregnant Women

1,902 Caregivers

Total Number of Home Visits 38,361
Maternal Health & Well-Being

Home visiting has been shown to reduce maternal depression and parental stress, and reduces mothers’ experience with intimate partner violence (MIHOPE). Screening for maternal depression and screening for intimate partner violence are the first steps to identifying women who are at risk.

- 3 in 4 mothers served by the HVSA received depression screening
- 2 in 3 women served by the HSVA received intimate partner violence screening

Parenting & Child Development

Home visiting improves the quality of the learning in the home environment, specifically offering support for children’s learning and literacy (MIHOPE).

- 82% of children served by the HVSA were less than three years old;
- 7 out of 10 children benefited from daily reading, story-telling, and singing; and
- 60% of children were assessed for developmental milestones with referrals to additional services provided as needed.

- 70% of children received their last recommended well-child visit.

Pregnancy & Early Infancy

Home visiting programs engage mothers prenatally to improve maternal and infant health, particularly among the most vulnerable populations:

- 1 in 5 pregnant women served by state home visiting programs are non-Hispanic African American, Native American/Alaska Native, or Native Hawaiian and other Pacific Islander. Mothers within these groups are twice as likely to experience an infant death.
- 1 in 4 pregnant women served by the state home visiting programs are less than 20 years old.

Despite serving a more vulnerable population, the preterm birth rate was 10% among home visiting clients in Washington, comparable to the state average.

Sudden Unexplained Infant Death Syndrome is one of the leading causes of infant mortality in Washington, and safe sleep is a key educational intervention offered to parents. 87% of caregivers in home visiting put their infant to sleep on their backs, yet only 25% also put the infant in their own bed or crib without soft bedding.

Service Utilization

- Referrals into home visiting were most commonly from other community programs, health providers, or friends and family.
- Over half of the families (53%) served remained in the program for at least 12 months of service.

*For more information or the full MIHOPE study, visit https://www.mdrc.org/project/mother-and-infant-home-visiting-program-evaluation-mihope#overview*