



# Home Visiting in New Hampshire

An overview of the Maternal Infant and Early Childhood Home Visiting (MIECHV) Program in NH and the benefits of home visiting to support and strengthen families

**Kristi Hart- Home Visiting Program Manager  
State of New Hampshire  
Division of Public Health Services**

# What do you know about home visiting?

## What is home visiting?

Regular, planned home visits provided by health, social services, and child development professionals.

Home visits may include:

- Supporting preventive health and prenatal practices
- Assisting families with breastfeeding, bottle feeding, general nutrition and other care for their babies
- Helping parents understand typical child development milestones and behaviors, providing anticipatory guidance around milestones to come
- Promoting parents' use of praise and other positive parenting techniques
- Working with families to set goals for the future and problem-solve

# HFA NH

- Statewide, intensive home visiting using guided by an evidence-based curriculum, Parents as Teachers (PAT) or Growing Great Kids (GGK)
- Serving families prenatal through age 3 (or 5 when referred by DCYF)
- Eligibility determined by HFA **F**amily **R**esilience and **O**pportunities for **G**rowth (FROG) tool, asses protective and risk factors through personal history interview:
  - family environment/supports/challenges, perception of child, child development knowledge, plans for discipline, CPS involvement, childhood experiences + or -, behavioral health, mental health, stress, social connections, partner support, conflict management & concrete supports

# HFA NH Continued

- Focus on the family system, caregiver-child interaction, building community and capacity
- Provide guidance around upcoming milestones
- Conduct Developmental Screening using ASQ-3 & ASQ-SE
- Maternal Depression Screening (EPDS or PHQ-9,) Screen for family violence
- **Voluntary**
- **Free!**

## Positive Findings, Well Supported

HFA has **positive findings in all eight domains** examined by the HHS Home Visiting Evidence of Effectiveness (HomVEE) review.

HFA is **rated at the highest level (well-supported)** by the Title IV-E Prevention Services Clearinghouse for the Family First Prevention Services Act (FFPSA).

# HFA Strengthens Parent-Child Relationships



## Positive Parenting Practices

HFA parents are **more confident as parents** and more likely to parent in ways that **promote healthy child development**. They interact more positively with their children and create **safer and higher quality home environments**.



Reduced  
recurrence of  
maltreatment  
by **1/3**

## Child Maltreatment

HFA **improves child safety and prevents maltreatment**, particularly for first-time parents who enroll prenatally. HFA parents also use more positive discipline, with **less physical punishment and yelling**. For families already involved with child welfare, **recurrence of maltreatment was reduced by one-third**.

[healthyfamiliesamerica.org](http://healthyfamiliesamerica.org)

# HFA Promotes Healthy Child Development



**48%**  
fewer  
low-birthweight  
infants

## Child Health

HFA parents have **fewer low-birthweight infants**, and more moms choose to breastfeed. HFA children **receive more well-child visits and developmental screenings**.



**26%**  
fewer children  
receive special  
ed services

## Child Development & School Readiness

HFA children show **enhanced cognitive development** and have **fewer behavior problems**. By the end of first grade, more HFA children excel academically and **fewer are retained or receive special education services**.

[healthyfamiliesamerica.org](http://healthyfamiliesamerica.org)

# HFA Enhances Family Well-Being



## Maternal Health and Wellness

HFA moms show **improved mental health, lowered parenting stress, and increased avoidance of risky behaviors** (including reducing alcohol and marijuana use by nearly half and increasing the use of condoms by almost 40%).



**27%**  
fewer families  
were homeless

## Economic Self-Sufficiency

HFA moms are more likely to continue their education. HFA moms are **5 times more likely to enroll and participate in school and training programs**, and teen moms are nearly **twice as likely to complete at least one year of college** compared to teen moms not receiving HFA. Children are more likely to have health insurance and **fewer moms report being homeless** in the six years since enrollment in HFA.



## Linkages and Referrals

HFA reduces barriers and **connects families with essential community services**, including referrals to **health services and links to economic supports** such as TANF and SNAP benefits.



## Family Violence

In HFA families, there is **less intimate partner violence and fewer incidents resulting in injury**.

# 35+

peer-reviewed published articles

HFA's most rigorous evidence includes 35+ peer-reviewed published articles and 14 randomized control trials that compare outcomes for families enrolled in HFA to those not offered HFA services.

# 30

years

Research over the past 30 years has shown positive results and sustained impact with HFA families in geographically and racially diverse communities experiencing various amounts of stress and challenge.

# \$1.43

return per \$1 invested

Every \$1 dollar spent on HFA produces an estimated Return on Investment (ROI) of \$1.43 in benefits for families and society.

For some families, ROI is even higher. A seven year study on HFA found an ROI of \$3.16 (**\$5.11** in 2022 dollars) for families involved with child welfare.

# Families Served in FY 2021

- ▶ In 2022 NH MIECHV served 522 adults with 306 children in 344 households
- ▶ 63% of families were at 133% or less below the federal poverty line (130% is the cutoff for SNAP eligibility)
- ▶ 58.2% of families were between 51%-133%. 34.5% did not report.
  - Ex- Single parent, 1 child, making \$12/hr, 40hr wk= \$2,112 gross per month. SNAP cutoff is \$1,984/month for household size of 2. This family MAY be eligible depending on their net income
- ▶ Home visitors support families in connecting with community resources that promote economic self-sufficiency



# Priority Populations Served

Households	Yes	No	Unknown/Did not Report*	Total
1. Low income household	141	92	111	344
2. Household contains an enrollee who is pregnant and under age 21	20	317	7	344
3. Household has a history of child abuse or neglect or has had interactions with child welfare services	110	179	55	344
4. Household has a history of substance abuse or needs substance abuse treatment	170	117	57	344
5. Someone in the household uses tobacco products in the home	123	161	60	344
6. Someone in the household has attained low student achievement or has a child with low student achievement	65	210	69	344
7. Household has a child with developmental delays or disabilities	77	201	66	344
8. Household includes individuals who are serving or formerly served in the US armed forces	12	272	60	344

FFY 2022 Form 1 MIECHV Data report

# Staff Roles within HFA

- ▶ Supervisor
- ▶ Program Managers
- ▶ Family Support Specialists
- ▶ Family Resource Specialists
- ▶ Early Support Service
- ▶ Nurses
- ▶ Quality Assurance/Quality Improvement

# Home Visiting Services in Every NH County

## Agencies:

- Community Action Program  
Belknap-Merrimack Counties, Inc.  
603-528-5334 ext. 125
- Waypoint  
1-800-640-6486 or 603-518-4000
- Community Action Partnership of  
Strafford County  
603-435-2500

- TLC Family Resource Center  
603-542-1848
- Family Resource Center  
603-466-5190
- Home Healthcare Hospice &  
Community Services  
603-352-2253
- Granite VNA  
(603) 832-8046



# For More Information

**Kristi Hart**  
**Home Visiting Program Manager**

(603) 491-5399

[Kristi.hart@dhhs.nh.gov](mailto:Kristi.hart@dhhs.nh.gov)

<https://www.dhhs.nh.gov/dphs/bchs/mch/home.htm>

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