

Georgia MIECHV *Annual Report*

*Highlights from Georgia's Maternal, Infant, Early
Childhood Home Visiting (MIECHV) Program*

October 1, 2023 – September 30, 2024



What is home visiting?

Home visiting is a service delivery strategy that aims to support the healthy development and well being of children and families. While each home visiting model has its unique aspects, in general, home visiting involves three main activities conducted through one-on-one interactions in a mutually comfortable space between home visitors and families:

- Assessing family needs,
- Educating, and supporting parents; and
- Referring families to identified services in the community.



Home visitors evaluate families' strengths and needs and provide tailored services to those needs on a weekly to monthly basis.

These tailored services include:

- ✓ Teaching positive parenting skills and parent-child interactions
- ✓ Promoting early learning in the home, with an emphasis on strong communication between parents and children that stimulates early language development
- ✓ Providing information and guidance on a wide range of topics, including breastfeeding, safe sleep practices, injury prevention and nutrition
- ✓ Conducting screenings and providing referrals to address postpartum depression, substance abuse and family violence
- ✓ Screening children for developmental delays and facilitating early diagnosis and intervention for developmental disabilities
- ✓ Connecting families to other services and resources as appropriate.

Evidence-based home visiting programs provide family-centric support services to at-risk pregnant people and families with children up to five years of age.

What is MIECHV?

Since 2010, the Health Resources and Services Administration's (HRSA's) federal voluntary, evidence-based Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program has empowered families with the tools they need to thrive. The MIECHV Program in Georgia, called the **Georgia Home Visiting Program**, is administered by the Georgia Department of Public Health and supports home visiting for pregnant individuals and families with children from birth to kindergarten entry living in communities at risk for poor maternal and child health outcomes. The Program builds upon decades of scientific research showing that home visits by a trained professional during pregnancy and early childhood improve the lives of children and families. Home visiting helps prevent child abuse and neglect, supports positive parenting, improves maternal and child health, and promotes child development and school readiness. The program is undergirded by a state-level infrastructure designed to support project implementation and evaluation via the provision of technical assistance and trainings as well as the collection of data to allow performance monitoring and continuous quality improvement over time.



MIECHV is the primary funding stream for home visiting in Georgia; other investments in home visiting include Family First Prevention Services Act, Promoting Safe and Stable Families (PSSF), and Child Abuse and Neglect Prevention (CANP), all administered by the Georgia Division of Family and Children Services (DFCS).

In FY2024, 1,617 families were served by programs funded with MIECHV dollars through just under 20,000 home visits. Additional data highlights can be found within the pages of this report.

Why Home Visiting Matters

Home visitors and families build strong, supportive relationships that foster growth and development in the lives of children. Parents and caregivers work collaboratively and voluntarily with their home visitors to develop goals for their families with the intent of enhancing the health and well-being of their children and themselves. Georgia Home Visiting Program prioritizes funding for services in priority communities, where there are higher numbers of families facing adversity. All home visiting services are voluntary. By meeting the families where they are, home visitors have been able to demonstrate positive impacts on the health, safety, and school-readiness of children.



Georgia's Local Implementing Agencies

In FY24, the Georgia Home Visiting Program (GHVP) provided home visiting services to eligible families who reside in at-risk communities and represent priority populations in 16 counties in Georgia that are served by 15 home visiting programs represented by 11 Local Implementing Agencies (LIAs). The home visiting models implemented are: (1) Healthy Families Georgia (HFG), (2) Parents as Teachers (PAT) and (3) Nurse-Family Partnership (NFP). Details of these models are described later in this report.

In addition, GHVP helps to coordinate necessary services within and outside of home visiting programs to provide support and technical assistance to the home visiting staff to address needs of participants, which may include: mental health, primary care, dental health, children with special needs, substance use, childhood injury prevention, child maltreatment, school readiness, employment training and adult education programs.



Georgia's Local Implementing Agencies

MIECHV statewide capacity = 1,361
MIECHV-ARP* statewide capacity = 30
Total GHVP statewide capacity = 1,391

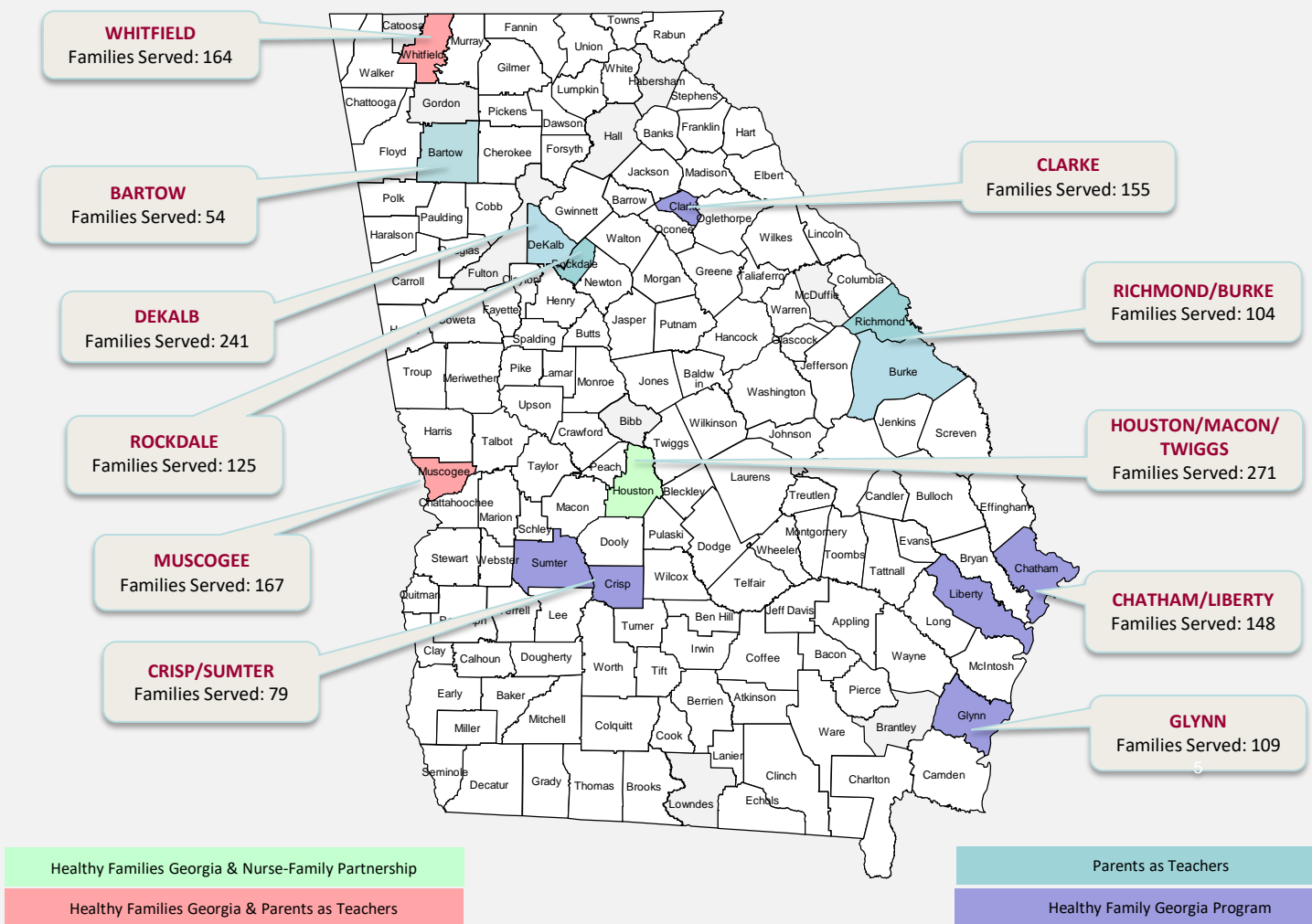
County	Name of LIA	EBHV Model	Funding Source	Capacity
Bartow	Advocates for Children	PAT	MIECHV	40
Chatham/ Liberty	Coastal Coalition for Children	HFG	MIECHV	126
Clarke	Brightpaths	HFG	MIECHV	108
Crisp	Cordele Housing Authority	HFG	MIECHV	72
DeKalb	New American Pathways	PAT	MIECHV MIECHV-ARP	90 15
DeKalb	Scottdale Early Learning Center	PAT	MIECHV	120
Glynn	Coastal Coalition for Children	HFG	MIECHV	108
Houston	Rainbow House	HFG	MIECHV	90
Houston	Houston County Health Department	NFP	MIECHV	125
Muscogee	University of Georgia	HFG	MIECHV	72
Muscogee	University of Georgia	PAT	MIECHV	60
Muscogee	West Central Health District	PAT	MIECHV-ARP	15
Richmond	Augusta Partnership for Children	PAT	MIECHV	100
Rockdale	Rockdale County Schools	PAT	MIECHV	100
Whitfield	Family Support Council	HFG	MIECHV	90
Whitfield	Family Support Council	PAT	MIECHV	60

**The American Rescue Plan (ARP) Act provided additional federal funds through September 30, 2024 to support home visiting programs in addressing the needs of expectant parents and families with young children during the COVID-19 public health emergency.*

Georgia Home Visiting Program Counties and Families Served

MIECHV Families Served = 1,617

October 1, 2023 to September 30, 2024



What happens during a home visit?

Home visits focus on linking pregnant women with prenatal care, promoting strong parent-child attachment, coaching parents on learning activities that foster their child's development and supporting parents' role as their child's first and most important teacher. Home visitors also conduct regular screenings to help parents identify possible health and developmental issues.

Home visits are conducted in the home to build on the primary learning environment of the family. Home visitors build and maintain positive relationships with families to guarantee that the visit is truly responsive to the family's needs.

During FY24, 19,916 home visits were completed statewide by MIECHV funded Georgia Home Visiting Program sites.



Home visits typically consist of:

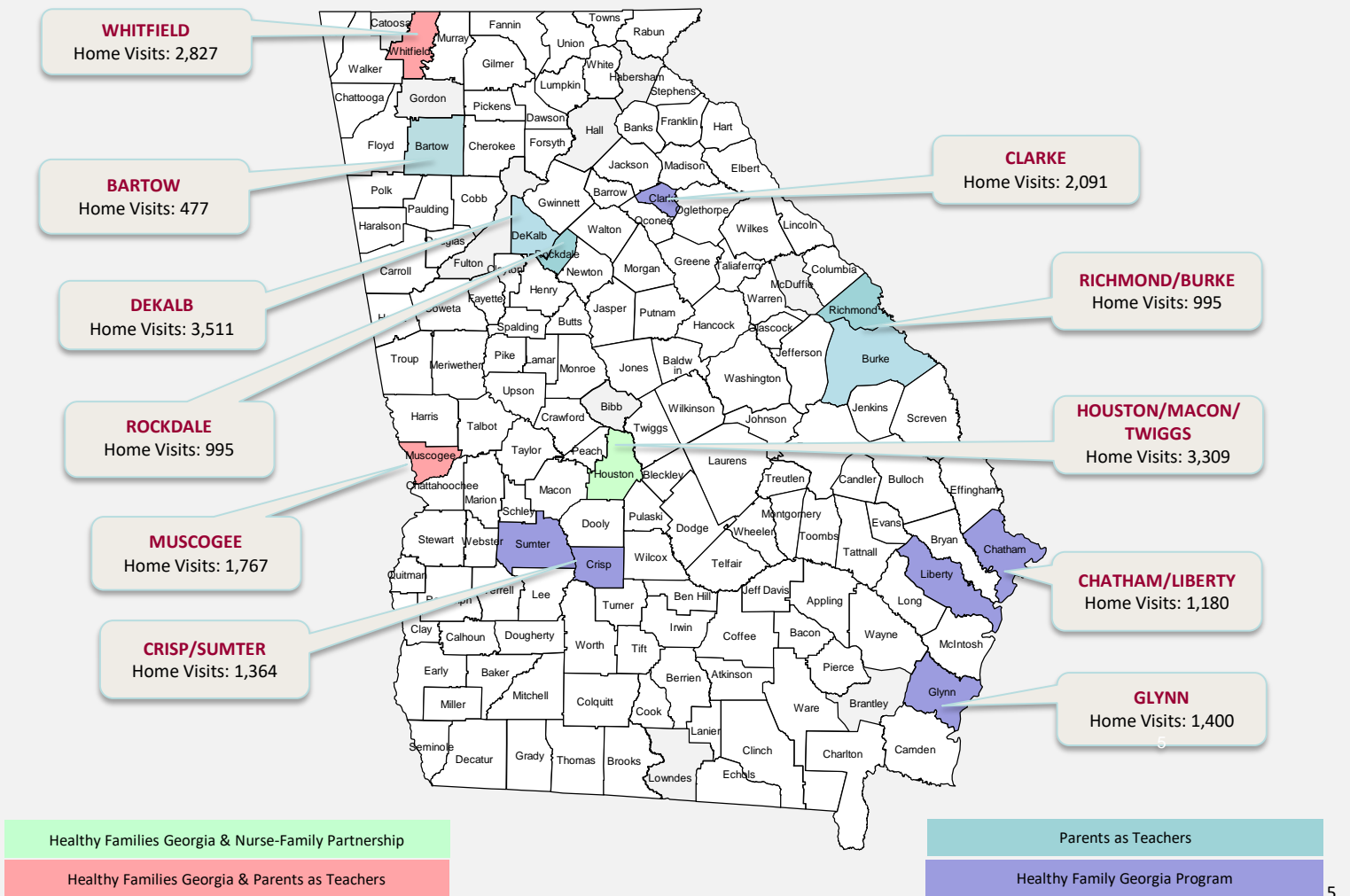
- Planned activities to enhance parent-child bonding and child development
- Screening for necessary services and referrals as needed
- Developmental screening to identify any need for early intervention
- Provision of health and nutritional information
- Linkage to community resources
- Assistance with setting and achieving goals

At the end of FY2024, 78% of home visits were completed in person. 23% were completed virtually.

Georgia Home Visiting Program Completed Home Visits

Number of Completed Home Visits: 19,916

October 1, 2023 to September 30, 2024



Home Visiting Model	In-person Home Visits	Virtual Home Visits	Total
Healthy Families Georgia	7555	3262	10817
Nurse-Family Partnership	1023	370	1393
Parents as Teachers	5222	2484	7706

Total **13800** **6116** **19916**

Evidence-Based Home Visiting Models in Georgia

The Georgia Home Visiting Program's evidence-based home visiting models are described below. These models are proven to improve outcomes in several domains including (1) maternal and child health, (2) positive parenting practices, (3) child development and school readiness, (4) reductions in child maltreatment, (5) family economic self-sufficiency and (7) linkages and referrals to community resources and supports.



Healthy Families Georgia (HFG) focuses on enhancing early, nurturing relationships between children and their primary caregivers as the foundation for life-long, healthy development. Eligibility requirements include single parents, low-income households, and parents facing challenges, such as a history of abuse, substance use, mental health issues, or domestic violence. Pregnant participants and families with a child up to three months of age may enroll, with services provided through the child's fifth birthday. Program participation includes 60 minute home visits every other week throughout pregnancy and weekly from birth to age 6 months. Subsequent visit frequency depends on families' needs and progress over time.

Parents as Teachers (PAT) focuses on enhancing parenting knowledge, attitudes, and behaviors, and promoting family well-being to positively impact children's developmental trajectories. Families served include children with special needs, families at risk for child abuse and neglect, low-income families, teen parents, first-time parents, immigrant families, low literate families, and parents with mental health or substance use issues. Families may enroll throughout pregnancy up until their child's 3rd birthday, with services continuing until the child reaches kindergarten. Participation includes 60 minute home visits conducted every other week and monthly group connection meetings for parents.

Nurse-Family Partnership (NFP) aims to promote healthy pregnancies for low-income, first-time mothers. Mothers are enrolled before their 28th week of pregnancy, with services continuing until the child reaches two years of age. Trained nurses promote mothers' self-efficacy and personal growth and encourage attachment and healthy parenting choices. Program participation includes 60 to 75 minute home visits weekly in the first month of enrollment and for six weeks following birth, every other week from six weeks until the child reaches 20 months of age, and monthly thereafter.



Home Visiting Success Stories

Home visiting helps strengthen thousands of families, giving parents the tools and resources they need to create healthy, nurturing environments for their kids. Georgia has seen countless success stories from our work with children and their caregivers. Our programs have helped promote healthy child development and self-sufficiency, and given parents the confidence and support to be the best parents they can be. The next pages showcase success stories that illustrate the power of home visiting!

Success Story: Jamila

Georgia Home Visiting Program
October 1, 2023 to September 30, 2024

I am Courtney Hall, a family support specialist (home visitor) with Healthy Families at Brightpaths. Jamila joined Healthy Families in March of 2023. Throughout Jamila's time in Healthy Families I supported her in many ways. From the start of our journey together Jamila shared she would like to strengthen the bond with her young son. During our visits, we focused on her goal through the use of an evidence based curriculum and hands on activities. To further support Jamila, I often encouraged to sign her up for counseling but she wasn't interested. During our visits we talked about how this service would benefit her and help her move past challenges she needed to work through. I felt as if she trusted me so I offered to support her by introducing her to the counselor and she accepted my offer. The counseling sessions have helped her in several ways, including how to move forward in life. She shared that she wouldn't have been able to achieve this without my motivation and support.

Jamila found her own apartment but needed support with getting organized and set up. We met at the leasing office of the apartment to make sure she had everything she needed to move in. One day she called and asked if I could help her set up utilities. We sat down and called each company and got everything figured out.



Jamila's son stayed with family members while she worked but eventually Jamila needed to find different child care. She heard about the Early Learning Center through a friend and she asked if I could help her apply.

During a home visit we sat together and called the Early Learning Center to get more information. Jamila asked if I could go with her to help fill out the registration paperwork. We met there and she completed all the paperwork. The director who helped Jamila stated she had never seen a family support specialist accompany a parent for support.

During my time with Jamila I have seen her grow as an individual and a parent. I am so proud of the accomplishments she has made. Jamila states that if she had one word to describe Healthy Families it would be "HOPE".

Success Story: Shamshad

Georgia Home Visiting Program
October 1, 2023 to September 30, 2024

Shamshad is not new to Parents as Teachers. Her daughter Anaiza participated in the program during the COVID-19 pandemic. Due to social distancing, services were provided to families virtually, then but this time was different for Shamshad as visits were now face to face. Shamshad reached out to Scottdale Early Learning after giving birth to her son, Sameer. Her first visit with her home visitor took place when Sameer was 3 weeks old.



Even though Shamshad had participated in the program before, her initial discussions with her home visitor emphasized that all children are different. They have different personalities, temperaments, and learning styles. Shamshad embraced these concepts and has been able to tailor her parenting skills to benefit Sameer. Sameer's sister, Anaiza is very happy that her brother gets a teacher like the one she had when she was little. Shamshad has become very confident in her parenting skills and is very consistent with her visits. She enjoys this program so much that she has referred over 6 families to the Scottdale Early Learning PAT program and all the families have been enrolled and begun services.



**Scottdale
Early Learning**

Parents as Teachers
Scottdale Early Learning
Atlanta, Georgia

Success Story

Georgia Home Visiting Program

October 1, 2023 to September 30, 2024

A child's ASQ-3 score in the area of communication prompted a conversation between a family and their Parent Educator (PE). The ASQ-3 is a reliable, widely used developmental screening tool used to help accurately identify children who may be at risk for developmental delays.

The family let the PE know that they would devote more time to the child in this area of opportunity. The PE searched for helpful activities and handouts to review and practice in the coming home visits. After just two months of partnership, the PE noted how proud she was of that family and their growth. The PE explained that each handout she provided was so appreciated and that the activities were executed with much intent. The child was excited to see the PE at their last visit, and she shared that her and the child “had a short conversation that included many new words.”

The family rejoiced over how much the baby was talking and the Parent Educator praised them for their participation because they were the change.

As a program we are so very proud of the way the PE empowered the families decision and facilitated the resources that they needed. She showed an amazing understanding of The Parents as Teachers model of partnering, facilitating and reflecting resulting in a real relationship. Her praise and happiness represented how much she cared for this child's development and future. This is a perfect example of what we do and why we do it. Each child matters and we have the opportunity and the tools to help.



FAMILY SUPPORT
COUNCIL

Parents as Teachers
Family Support Council
Dalton, Georgia



Professional Development

October 1, 2023– September 30, 2024

Georgia Home Visiting Institute

Tuesday, August 20, 2024
Peachtree City, Georgia

The fourteenth annual Georgia Home Visiting Institute (HVI) was held on August 20, 2024, at the Hilton Peachtree City Atlanta Hotel and Conference Center in Peachtree City, Georgia with 218 attendees present from across the state. The event was sponsored by the Georgia Department of Public Health with additional funding support provided by the United Way of Greater Atlanta and The Georgia Division of Family and Children Services.



This year's theme, *Expanding Your Horizons*, relates to the idea of expanding knowledge, experience, or understanding of the world. In other words, it's a way of saying, "Go explore. Learn something new." Throughout the planning and coordination of the event, we strived to select content that was new, enhanced skills and took home visiting staff out of their comfort zone into areas where they felt empowered to grow and expand home visiting throughout the state.



Georgia Home Visiting Institute

Tuesday, August 20, 2024
Peachtree City, Georgia

Keynote



Scientist, author and founder of the Alaska Family Violence Prevention Project, Dr. Linda Chamberlain has worked in the field of brain development, stress and trauma for over twenty years. During her keynote, this internationally recognized speaker shared a heartfelt story of how the idea for an Alaska-themed children's book that uses sled dogs to share simple tools for self-calming and regulating emotions became a reality. *Howling with Huskies and Other Ways to Feel Good* highlights science-supported strategies that are effective for children and adults at releasing stress, building resilience and supporting emotional regulation. The keynote was well received by attendees, earning an overall evaluation score of 4.4, where 1 is poor and 5 is excellent.

General Session

All attendees participated in a sixty-minute session that was facilitated by the Georgia Early Education Alliance for Ready Students (GEEARS). Jessica Voldtjen, Hanah Goldberg and Caitlyn Sanders shed light on the current home visiting policy landscape at both the federal and state levels and showed participants how to translate their professional experiences into powerful advocacy. They also shared legislative and budgetary updates and provided an opportunity for home visitors and advocates to come together, share knowledge, and discuss strategies to enhance the accessibility and effectiveness of home visiting in Georgia. This session was well received by attendees, earning an overall evaluation score of 4.1, where 1 is poor and 5 is excellent.

Georgia Home Visiting Institute

Tuesday, August 20, 2024
Peachtree City, Georgia

Breakout Sessions

Throughout the day, attendees participated in two ninety-minute breakout sessions on various topics which provided in-depth discussions and skills training around family engagement, breastfeeding, developmental monitoring, working with vulnerable populations and self-care and putting this knowledge to practice. A buffet lunch was offered after the first workshop and then after lunch, attendees participated in one workshop in the afternoon. The selection of workshops was evaluated by participants and given an overall evaluation score of 4.2, where 1 is poor and 5 is excellent.

SESSION TITLE	PRESENTERS
The New Science Of Resilience And Simple Tools To Befriend the Nervous System	Linda Chamberlain, PhD, MPH
Building Connection Through Authenticity With Individuals Seeking Recovery	Demetra Bowles and Jodie Wacaster, Georgia Council for Recovery
Smart Screens, Happy Families: Helping Families Navigate Screen Time With Young Children	Ambria King, Georgia Public Broadcasting
Connecting Caregivers With Legal Remedies And Resources	Jacqueline Payne and Kate Gaffney, Atlanta Legal Aid
Family Life Simulation	Tiara Smith and Grace Arthur, Healthy Families Athens, Brightpaths
Understanding Children 1 st , Babies Can't Wait And Children's Medical Services	Sara Beth Tung, Jenni Nowicki, and Quondalynn Rainey, Georgia Department of Public Health
Identifying And Mitigating Barriers To Breastfeeding Success	Claire Eden, IBCLC, Summer Gilmer-Hughes, MS, and Rebecca Dixon, MA, IBCLC, Georgia Chapter, American Academy of Pediatrics
Beyond The Checklist: Developmental Resources To Engage And Strengthen Georgia's Families	Bridget Ratajczak and Jennifer Semendy, Georgia Department of Early Care and Learning



Other Home Visiting Activities

October 1, 2023– September 30, 2024

The Preeclampsia Project

The Preeclampsia Project for Home Visiting pilot provided an opportunity for home visitors to empower women to make health decisions for their current pregnancy and for subsequent pregnancies by providing education about risk factors for pregnancy induced hypertension (PIH) preeclampsia, and premature delivery to pregnant women with elevated risks served in home visiting. In partnership with Healthy Mothers, Healthy Babies Coalition of Georgia, home visitors provided over 300 perinatal care packages to women with elevated risk factors to help them monitor and treat potential symptoms. Each package included a informational brochure, an automatic blood pressure monitor, compression stockings, urine test strips, measuring tape, and a notepad.

Packages were hand delivered to eligible pregnant caregivers by their home visitors and home visitors explained the warning signs of preeclampsia and show caregivers how to use the items in their care package to monitor symptoms and advocate for their health. The Preeclampsia Project for Home Visiting allowed home visitors who have established trust based relationships with pregnant caregivers with elevated risk of PIH to provide strategies to reduce their risk and to facilitate their ability to recognize early indicators that they are experiencing an urgent and potentially life-threatening emergency.

Continuous Quality Improvement

Continuous Quality Improvement (CQI) is a strength-based process that relies on teamwork to improve processes, services and outcomes. It is an ongoing cycle of collecting data and then testing, implementing, learning from, and revising solutions. CQI is a required component of MIECHV. Home visiting programs conduct CQI activities as part of working to improve the quality of home visiting services in Georgia.

In FY2024, the Georgia MIECHV Program engaged in a statewide CQI learning collaborative to enhance home visitor recruitment, retention and well being. Through employing CQI principles, skills and methods, including Plan-Do-Study-Act cycles, LIA CQI teams identified and tested approaches to support these areas. Teams focused their tests of change on three critical areas (primary drivers): a. hiring practices; b. teamwork and communication; and c. well-being. We believe that increasing well being among home visiting staff will support improved engagement in self and collective care, reduced burnout and turnover among staff and ultimately, strengthened home visitor-client relationships and family outcomes.



Georgia Home Visiting Program Data Highlights

October 1, 2023– September 30, 2024

Who We Served

Caregiver characteristics

Georgia MIECHV served 1,617 families across sixteen counties in FY2024. Participant demographic characteristics for caregivers are described below.

- 23% of caregivers (23%) are under 25 years of age.
- 8% of caregivers are teen parents.
- 30% of caregivers are Hispanic/Latino.
- 52% of caregivers are Black/African American.
- 43% of caregivers are unmarried or not living with a partner.
- 27% of caregivers earned less than a high school diploma.
- 50% of caregivers are employed.



Children characteristics

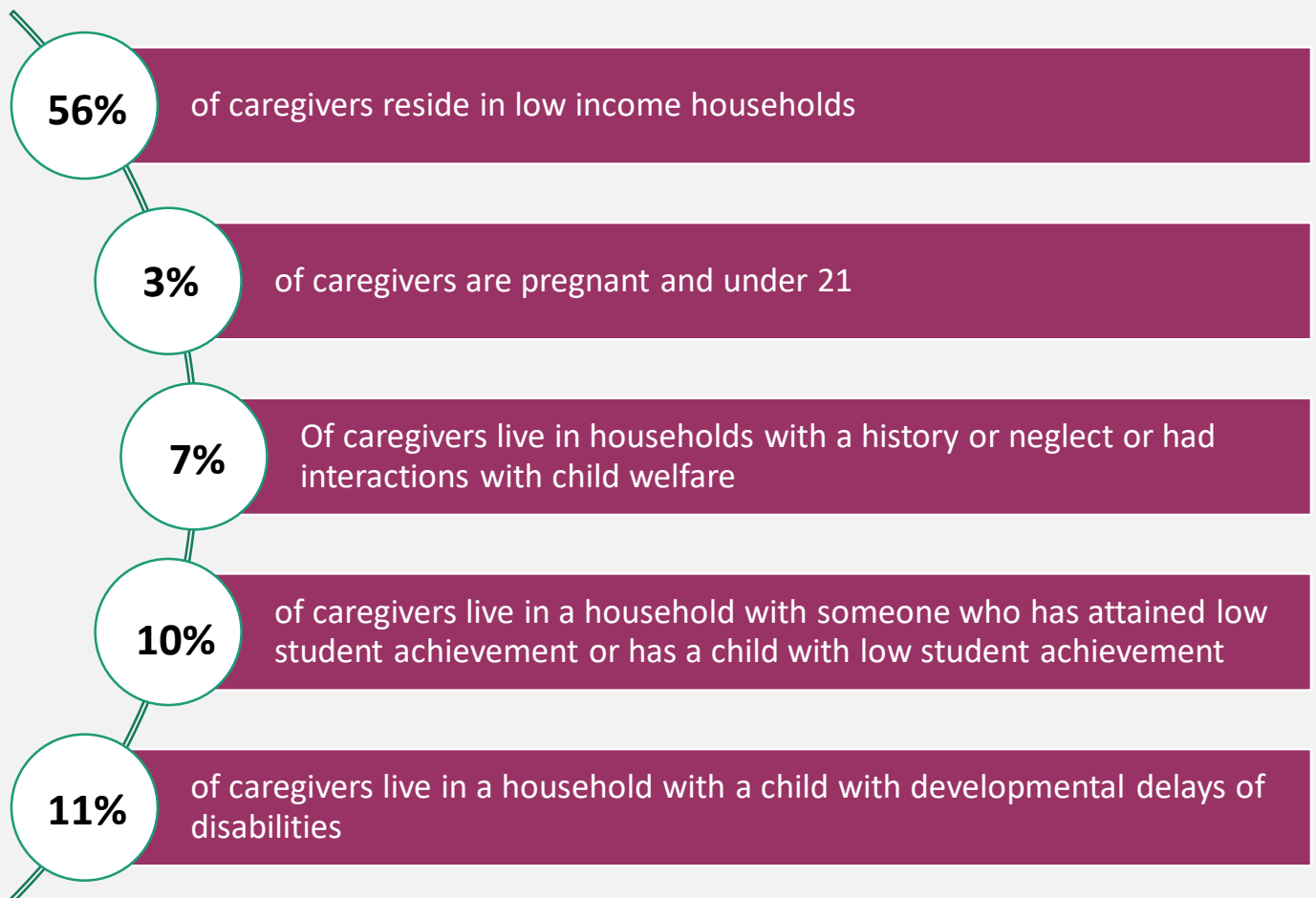
Georgia MIECHV served 1,558 children in FY2024. Participant demographic characteristics for these children are described below.

- 45% of children enroll at under one year of age.
- 24% of children's primary language spoken at home is Spanish.
- 84% of children have Medicaid or CHIP insurance coverage.
- 76% of children over one year of age have a usual source of dental care.
- 99% of children served have an established medical home.

Who We Served

Home visitors play a crucial role in supporting families, particularly those facing risk factors associated with poorer health outcomes. Families participating in home visiting experience numerous risk factors, including:

- ✓ Low income
- ✓ Pregnancy at a young age (under 21)
- ✓ Homelessness
- ✓ History of child abuse or neglect or interactions with child welfare services
- ✓ Substance abuse
- ✓ Use of tobacco products
- ✓ Low student achievement
- ✓ Household with a child with developmental delays or disabilities



How We Performed

HRSA and DPH require LIAs to report on their performance related to six statutorily defined benchmark areas. The performance measurement system includes a total of 19 measures across the six benchmark areas (see right). The 19 performance measures reflect a two-generation approach, aimed at improving the well-being of both caregivers and children.

Included is a subset of performance outcomes that highlight the impact of the Program on parents and their children. These performance measures help tell the story of home visiting in Georgia and paint a picture of the improvements that are made in the lives of children, caregivers and families.



Child Injuries, Maltreatment, and Reduction of Emergency Department Visits

- Safe Sleep
- Child Injury
- Child Maltreatment

School Readiness and Achievement

- Parent-Child Interaction
- Early Language and Literacy Activities
- Developmental Screening
- Behavioral Concerns

Maternal and Newborn Health

- Preterm Birth
- Breastfeeding
- Depression Screening
- Well-Child Visit
- Postpartum Care
- Tobacco Cessation Referrals

Crime or Domestic Violence

- Intimate Partner Violence (IPV) Screening

Family Economic Self-Sufficiency

- Primary Caregiver Education
- Continuity of Health Insurance

Coordination and Referrals

- Completed Depression Referrals
- Completed Developmental Referrals
- Intimate Partner Violence (IPV) Referrals

How We Performed

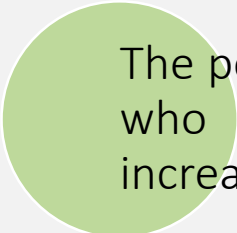
The following Performance Measures are mandated by the Health Resources and Services Administration, which oversees the federal Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program. The Performance Measures are intended to help tell the story of home visiting in Georgia and nationwide. The data shown below are only for all home visiting programs in Georgia from 10/1/23 to 9/30/24 that are funded by the Georgia Department of Public Health.

- ❖ 10% of women enrolled prenatally delivered preterm.
- ❖ 39% of infants were breastfed at six months of age.
- ❖ 93% of primary caregivers were screened for depression.
- ❖ 80% of children received their last well child visit.
- ❖ 90% of mothers received a postpartum visit within 8 weeks of delivery.
- ❖ 81% of primary caregivers who used tobacco products at enrollment received a referral to cessation services.
- ❖ % of primary caregivers consistently practiced safe sleep methods with their infants.
- ❖ 0.2% of enrolled children had an injury related emergency department visit.
- ❖ 0.6% of children had an investigated case of maltreatment following enrollment.
- ❖ 92% of primary caregivers were specifically assessed for their parent-child interactions.
- ❖ 98% of children had someone who read or sang to them daily.
- ❖ 87% of children received an on-time screening for developmental delays.
- ❖ 100% of visits included asking primary caregivers if they had any concerns about their child's development, behavior, or learning.
- ❖ 96% of primary caregivers were screened for intimate partner violence within 6 months of enrollment.
- ❖ 21% of primary caregivers who enrolled without a high school degree or GED subsequently enrolled in an educational program.
- ❖ 72% of primary caregivers had continuous health insurance coverage for at least 6 months of the year.
- ❖ 100% of primary caregivers referred due to a positive screen for depression received mental health services.
- ❖ 100% of children referred due to a positive screen for developmental delays received services in a timely manner.
- ❖ 100% of primary caregivers who screened positive for intimate partner violence received referral information to appropriate community resources.


How We Performed

From October 2023 to September 2024, the Georgia Home Visiting program showed successes in all six constructs: (1) maternal and newborn health; (2) child Injuries, child abuse and neglect or maltreatment and emergency department visits; (3) school readiness and achievement; (4) domestic violence or crime; (5) family economic self-sufficiency; and (6) Coordination and referrals for other community resources and supports.

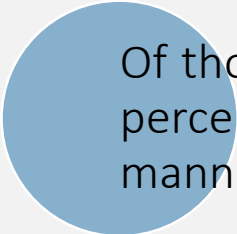
Highlights from the beginning to the end of the FY24 project comprise the following exemplars:




The percentage of primary caregivers enrolled in home visiting who receive an observation of caregiver-child interaction increased from 91.6% to 92.4%.



The percentage of primary caregivers enrolled in home visiting with positive screens for intimate partner violence (IPV) who received information on IVP resources remained at 100%.



Of those caregivers who screened positive for depression, the percentage of caregivers who received services in a timely manner increased from 78.9% to 100%.



Of those children who screened positive for suspected developmental delay, the percentage of children who received services in a timely manner remained at 100%.

The voluntary Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program gives pregnant people and families living in communities at risk for poor maternal and child health outcomes the necessary resources and skills to raise children who are physically, socially, and emotionally healthy and ready to succeed.



In FY 2024, the Georgia MIECHV Program served 1,617 families and provided more than 19,900 home visits.



Counties served: Bartow, Burke, Chatham, Clarke, Crisp, DeKalb, Glynn, Houston, Liberty, Macon, Muscogee, Richmond, Rockdale, Sumter, Twiggs, Whitfield



The Georgia MIECHV Program continued to serve many of the most vulnerable families in FY 2024



88%

of participating families had household incomes at or below 200% of the federal poverty guidelines (\$62,400 for a family of four)



59%

of adult program participants had a high school diploma or less

Families served by the Georgia MIECHV Program were at risk for poor family and child outcomes in FY 2024



7%

of households reported a history of child abuse and maltreatment



11%

of households have children with developmental delays or disabilities



28%

of caregivers did not have health insurance coverage for at least six consecutive months



14%

of households included enrollees who are pregnant teens

Georgia MIECHV Program's impact on caregivers and their children in FY 2024

90% of MIECHV children aged 9-30 months were screened for developmental delays

80% of children enrolled in MIECHV had a family member who read, told stories and/or sang with them daily

93% of caregivers enrolled in MIECHV were screened for depression

90% of mothers enrolled in MIECHV received a postpartum visit with a health care provider within 8 weeks of delivery

80% of children enrolled in MIECHV received the most recent recommended well-child visit based on the American Academy of Pediatrics schedule

96% of caregivers enrolled in MIECHV were screened for intimate partner violence

Georgia Home Visiting Program State Team

Georgia Department of Public Health Home Visiting Team

The Georgia Department of Public Health has an internal Home Visiting Team within the Office of Child Health that provides administration and oversight of the Maternal, Infant and early Childhood Home Visiting (MIECHV) program.



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Senior Manager, Neonatal
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Division of Women, Children
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Chiquita Turner, LMSW
Home Visiting Program
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Home Visiting Technical Assistance and Quality Team Center for Family Research, University of Georgia

The Georgia Department of Public Health contracts with the Center for Family Research at the University of Georgia to provide support to Georgia's First Steps and Home Visiting programs. The TAQ provides technical assistance, training, data system maintenance, performance monitoring, continuous quality improvement and evaluation with the goal of helping programs do what they do best: provide high quality services to Georgia's families.



Anita Brown
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TAQ Contract Lead



Nicole Copeland
First Steps
Georgia
State Lead



Paige Ferrell
Healthy
Families
Georgia
State Lead



Jessica Gurnow
Georgia
Parents as Teachers
State Lead



Ashley Maddox
Home Visiting
Technical Assistance
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Coordinator



Tracey Hickey
GEOHVIS Data
System
TA/Training
Lead



Michelle Lanier
TAQ Team
Director



Ramonica Oxley
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Parents as Teachers
Coordinator



**UNIVERSITY OF
GEORGIA**
Center for Family Research
Owens Institute for Behavioral Research



UNIVERSITY OF
GEORGIA

Center for Family Research
Owens Institute for Behavioral Research

Home visiting promotes maternal and child health, parent-child engagement, and child development and school readiness. Services are targeted to families that are high risk for child abuse and neglect.