

Georgia Home Visiting Program *Annual Report*

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

October 1, 2020 – September 30, 2021



UNIVERSITY OF
GEORGIA

Center for Family Research

Owens Institute for Behavioral Research

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

All home visiting programs share characteristics; yet evidence-based models have different approaches based on family needs. In these voluntary programs, trained and certified home visitors partner with enrolled families, building strong positive relationships. 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.

What is home visiting?



What is MIECHV?

Since 2010, the Health Resources and Services Administration's (HRSA's) 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 is administered by the Georgia Department of Public Health and supports home visiting for pregnant women and families with children up 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. Evidence-based home visiting helps children and families get off to a better, healthier start, and it can be cost-effective in the long term, with the largest benefits coming through reduced spending on government programs and increased individual earnings. By developing strong relationships with families, providing regular home visits, assessing family needs and delivering tailored services, the MIECHV Program supports the health and well-being of pregnant women and parents with young children.

Maternal, Infant, and Early Childhood HOME VISITING PROGRAM

The Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program gives pregnant women 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.



What is the Georgia Home Visiting Program?

The Georgia Home Visiting Program (GHVP) was established to strengthen Georgia's capacity for addressing the overall health, safety and wellbeing of families and children through the implementation of Evidence-Based Home Visiting (EBHV) services and the enhanced coordination of services for at-risk families. 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.

The federal Maternal, Infant, Early Childhood Home Visiting (MIECHV) program is the primary funding stream for home visiting; other funding streams for home visiting include Title V, Child Abuse and Neglect Prevention (CANP), and other state dollars.

In FY2021, 1,550 families were served by programs funded with MIECHV dollars and an additional 375 families were served as a result of additional funding streams. Additional data highlights can be found within the pages of this report.

Georgia's Local Implementing Agencies

GHVP is managed by the Georgia Department of Public Health and provides home visiting services to eligible families who reside in at-risk communities and represent priority populations in 27 counties in Georgia that are served by 18 Local Implementing Agencies (LIAs). The home visiting models used 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 = 1,301

Total GHVP statewide capacity = 1,659

County	Name of LIA	EBHV Model	Funding Source	Capacity
Bartow	Advocates for Children	PAT	MIECHV	40
Bibb	United Way of Central Georgia	PAT	Title V	80
Catoosa	Communities in Schools of Catoosa County	PAT	CANP	18
Chatham/Liberty	Coastal Coalition for Children	HFG	MIECHV	91
Clarke/Jackson	Brightpaths	HFG	MIECHV	110
Crisp/Dooley	Cordele Housing Authority	HFG	MIECHV	56
DeKalb	New American Pathways	PAT	MIECHV	90
DeKalb	Scottdale Early Learning Center	PAT	MIECHV	105
Fulton	Fulton County Board of Health	PAT	DPH	40
Glynn	Coastal Coalition for Children	HFG	MIECHV CANP	91 40
Gordon	Family Resource Center Gordon	PAT	Title V	60
Houston	Rainbow House	HFG	MIECHV	80
Houston	Houston County Health Department	NFP	MIECHV	108
Lowndes	Lowndes Commission on Children and Youth	PAT	Title V	80
Lowndes	South Health District	PAT	DPH	40
Muscogee	University of Georgia	HFG	MIECHV	90
Muscogee	University of Georgia	PAT	MIECHV	60
Richmond	Augusta Partnership for Children	PAT	MIECHV	120
Rockdale	Rockdale County Schools	PAT	MIECHV	110
Whitfield	Family Support Council	PAT	MIECHV	70
Whitfield	Family Support Council	PAT	MIECHV	80

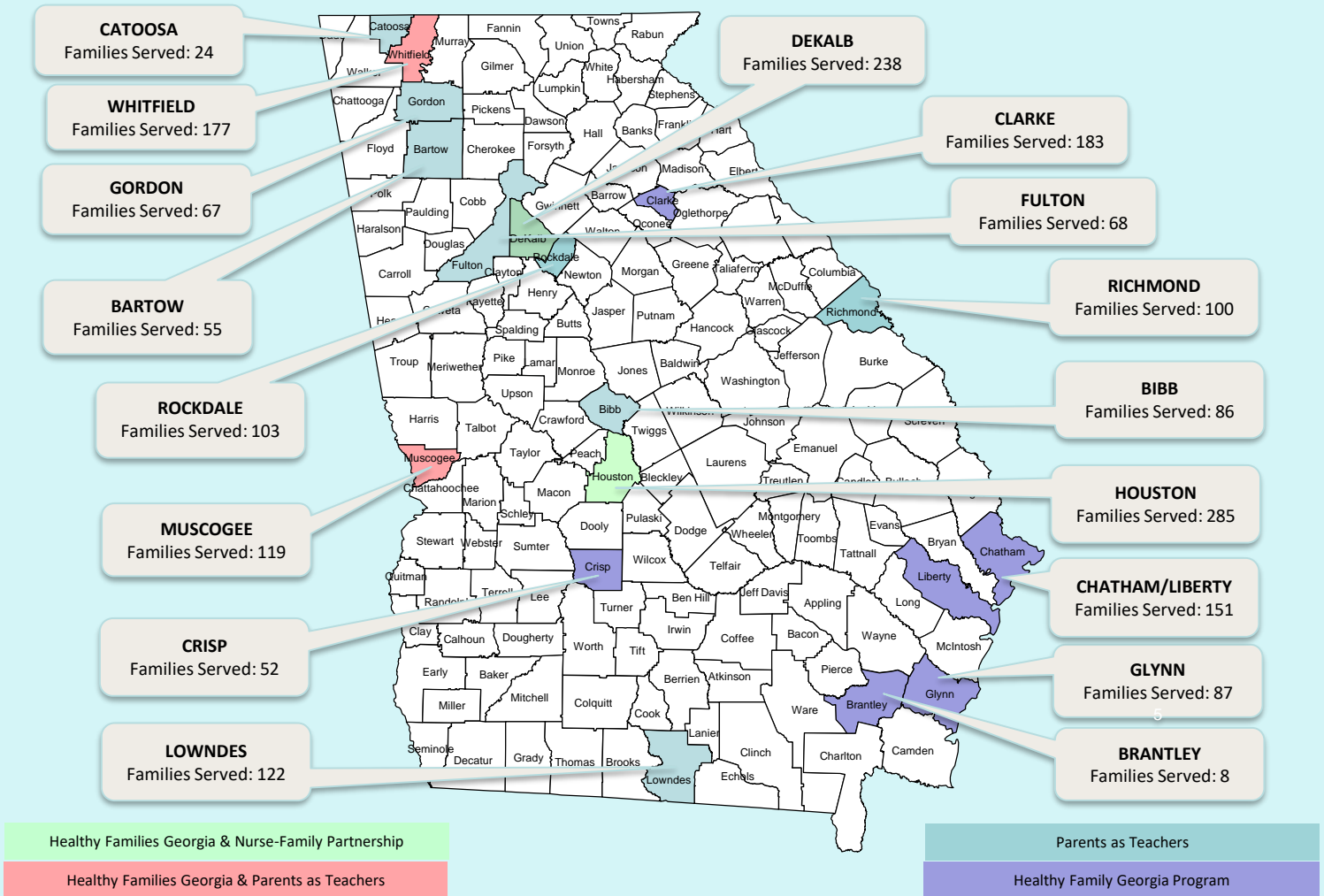
Where is Home Visiting in Georgia?

Georgia Home Visiting Program Counties and Families Served

MIECHV Families Served = 1550

Total GHVP Families Served = 1,925

October 1, 2020 to September 30, 2021



During FY21, 22,863
home visits were
completed statewide
by Georgia Home
Visiting Program sites.

Home visits focus on linking pregnant women with prenatal care, promoting strong parent-child attachment, and 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. On each visit, home visitors focus their work with families on parent-child interaction, development-centered parenting, and family well-being, ensuring that all the areas are addressed with families. Home visitors build and maintain positive relationships with families to guarantee that the visit is truly responsive to the family's needs.

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 for education, job training, and financial planning

From October 1, 2020 to September 30, 2021, 22,863 home visits were completed statewide by the Georgia Home Visiting Program! See the next page for a breakdown of home visits by county.

What is a home visit?

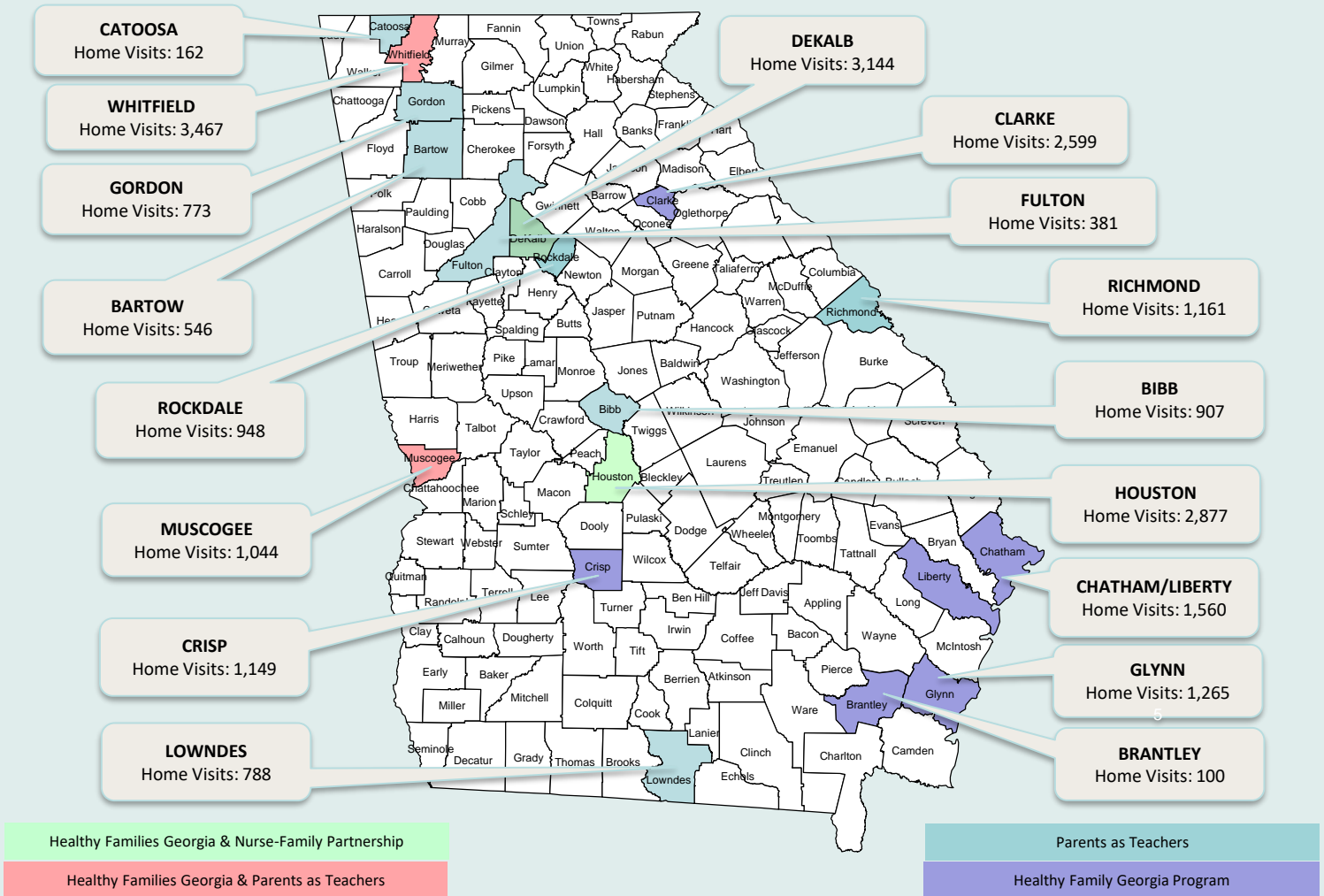
Home Visit Completion in Georgia

Georgia Home Visiting Program Completed Home Visits

MIECHV Home Visits Completed = 19,752

Total GHVP Home Visits Completed = 22,863

October 1, 2020 to September 30, 2021



Evidence-Based Home Visiting Models in Georgia

The EBHV program models represented by the Georgia Home Visiting Program 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. Click the icons to learn more about these models.



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 women 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. Eligibility requirements 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 entry. 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.



Program Highlights

2021 Georgia Home Visiting Institute

Learning from the Past, Thriving in the Present and Preparing for the Future

The eleventh annual Georgia Home Visiting Institute (HVI) was presented virtually as a series of four two-hour sessions on August 19, August 26, September 2 and September 9, 2021. The HVI was sponsored by the Georgia Department of Public Health in partnership with United Way of Greater Atlanta.



The opening keynote, *When the Bough Breaks: Contextualized Stress, Support, and Resilience and the Pathway to Birth Equity*, was led by Fleda Mask Jackson, PhD and enjoyed by 330 participants. Dr. Jackson explored the effects of contextualized stress on the mental and physical health of African American expectant and postpartum mothers. She shared how contextualized stress as a framework for elevating African American women's lived experiences of race and gender as risk and resilience can inform the assessment of maternal mental health and help evaluate individual and community level assets including home visiting. Dr. Jackson also examined the pivotal role of trusted community health workers in advancing birth equity through the cultural respect woven into the care and support that mothers expect to receive.

The featured speakers for the second session on August 26 were Sarah Blake, PhD, Silke von Esenwein, PhD, and Margaret Master from Emory University. In *Assessing the Impact of COVID-19 on Home Visiting (AICHV) in Georgia*, presenters shared the findings from an Emory-DPH research collaboration to assess the impact of the COVID-19 pandemic on home visiting services in Georgia with 295 attendees. The shared results addressed the essential and unmet needs of home visiting programs and their clients and present strategies for enhancing and adapting home visiting services during the pandemic.

Following this presentation, supervisor Daniel Charles and his home visiting team from the United Way of Central Georgia gave a presentation called *Ma-Con Families Stronger*, where they discussed how families are strengthened through their First Steps and Parents as Teachers home visiting program. The team shared best practices pre- and post-COVID-19 on how to support families as they become the best they can be.



2021 Georgia Home Visiting Institute

Learning from the Past, Thriving in the Present and Preparing for the Future

The third presentation, *Dear Parents: Discussing Discipline*, was led by Jyll Walsh, DrPH, with Prevent Child Abuse Georgia on August 26. In this session, the 271 participants learned the consequences and ineffectiveness of spanking and current beliefs and reasons for spanking, such as "I was spanked, and I turned out fine," and "spanking is the only thing that seems to work" through practice scenarios. In addition, attendees practiced communication skills to address the use of spanking by caregivers through role-playing.



The final keynote presentation on September 9 was led by Robert Sege, PhD from Tufts University. In *Healthy Outcomes from Positive Experiences (HOPE)*, Dr. Sege covered the effects of ACEs on health outcomes, the importance of positive childhood experiences, and the research showing their mitigating effects on ACEs, the biologic basis for these effects, the four building blocks of HOPE and Type 1 vs Type 2 Thinking. The presentation also introduced some ideas of how to incorporate the HOPE Framework into practice for 341 attendees.

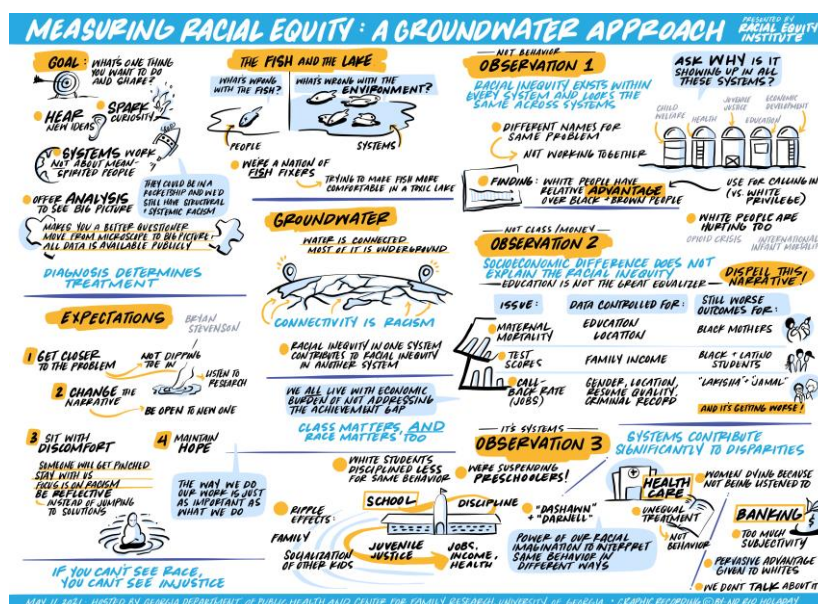
Following the HVI, attendees were offered the opportunity to complete an evaluation that requested their thoughts of the event. 56 attendees responded and the HVI was very well received with an overall evaluation score of 4.5 (1.0 being poor and 5.0 being excellent.) While the majority of attendees enjoyed the virtual format of the HVI, 55% admitted they would prefer to attend in-person to maximize the networking and learning opportunities.

When home visiting programs use culturally responsive and community-driven approaches to support underserved, low-income, or at-risk families, they can be even better positioned to address racial and ethnic disparities and improve maternal and early childhood outcomes.

Focus on Racial Equity

The Groundwater Approach

The Georgia Department of Public Health recognizes the need to provide Georgia's home visiting workforce with quality anti-racism and implicit bias training to support home visitors in their delivery of culturally responsive services to meet the unique needs of Georgia's diverse population. In May 2021, 133 home visitors and supervisors from across the state participated in a three-hour training on racial equity offered by the Racial Equity Institute. In *The Groundwater Approach*, trainers examined characteristics of modern-day racial inequity using data and stories. the presentation introduced the GHVP network to the Groundwater metaphor, which emphasizes that inequities are embedded in systems and in order to achieve meaningful improvement, the systems themselves must be changed.

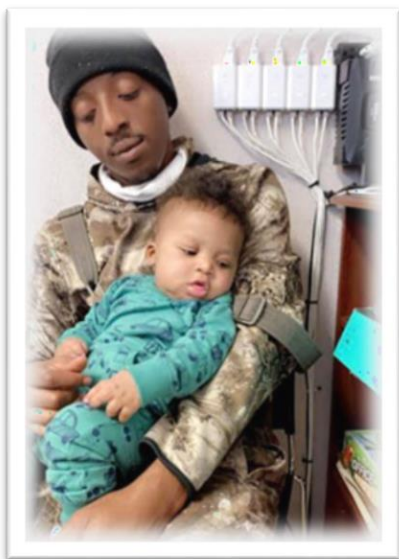


Attendees rated the training a 4.5 on a scale of 1 to 5 (with 1 being poor and 5 being excellent). 91% of attendees reported that the training was either “great” or “excellent” at meeting their needs and 84% reported a significant increase in knowledge as a result of the training. Several home visiting supervisors reported that they debriefed in the weeks following the training to find ways that they may each contribute to challenging bias that can inspire positive change. The Georgia Department of Public Health sees this as just the beginning and looks forward to further development of its home visiting workforce significantly around the areas of racial and health equity.

Fathers Matter in Home Visiting

In September 2021, DPH honored four sites the Roosevelt Muhammad Father Engagement Achievement Award for “excellence in serving fathers and families.” The list of awardees are:

- Lowndes Commission for Children and Youth – “Above and Beyond in Serving Fathers”
- Brightpaths – “Emerging Programs and Services in Serving Dads”
- Rainbow House Children’s Resource Center – “Expanding Outreach”
- Heart of Georgia Healthy Start – “Best All Around”



To continue supporting staff in providing direct and continual engagement for fathers, DPH partnered with Peach Care State Health Plan (formerly known as WellCare) to offer “StoryTime with Dad.” This partner intervention was formed and created to increase knowledge and awareness of the benefits related to early brain development, father involvement and a dad’s impact on child development during the early years. Specifically, the focus was on increasing the opportunities for fathers to read to their children and was offered virtually throughout the state. Potential reach for this project was 400k+ families in over 159 counties, served by both Peach State Health Plan, DPH, MIECHV and Healthy Start.

Home visiting programs are making father engagement a priority across Georgia.

In FY2021, 22 home visiting sites voluntarily participated in the pilot of the National Fatherhood Initiative Father Readiness Network Assessment, also known as the Father Friendly Check-Up. This assessment tool gauges the readiness of organizations and their staff to engage fathers using a vigorous 130-point questionnaire across four topic areas: Leadership, Organizational, Program Development and Community Engagement. Following the assessment, sites were supported in their efforts to develop action plans to increase father engagement and involvement across their agency (organizational structure) and families with the inclusion of Community Action Networks or Community Service Boards. This process took place over the course of about eight months, where sites convened monthly with DPH, attended Fatherhood Speaker Series workshops, developed subcommittees for sharing best practices and reaching common goals, performed site presentations, and began the development of a repository containing best and developing practices for replication.

GA Department of Public Health Fatherhood Initiative and WellCare presents

“STORY TIME with DAD”

Join “Story Time” for 30 minutes of fun reading and 30 minutes of parent education resources! Moms are also welcome to join!

Reading begins @ 6:00p EST

February 18th

March 18th

May 20th

June 17th

August 19th

September 16th

Stay tuned for the flyer with the links!

For questions, please contact
wykinia.culbreth@dph.ga.gov

Select sites will receive books for Dads participation!





The Role of Home Visiting During a Public Health Emergency

Strategies to Address COVID-19 Challenges

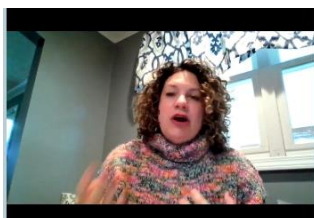
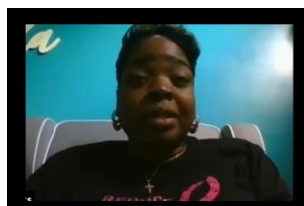
As a result of the coronavirus (COVID-19) public health emergency, the Georgia Home Visiting Program exclusively served families virtually in FY2021, in compliance with Centers for Disease Control and Prevention guidelines, to protect the health and safety of families and the home visiting workforce. Despite this challenge, home visiting programs continued to play a vital role in addressing the needs of pregnant women, young children and families. Home visitors continued to serve families, administer screens for depression and intimate partner violence for caregivers and potential developmental delays for children and home visitors made referrals to needed services to help caregivers and children be the best they could be. Home visitors supported families by identifying local and national COVID-19 related resources to help families understand the increased risk of severe illness. Home visitors connected families to needed health, mental health, child care and other services, and worked with families to identify strategies for managing stress and social isolation and promote family emergency planning strategies. The potential impacts of the emergency on pregnant women and families' access to critical health, early care and education, and family economic supports made continued connections with families through home visiting essential.

Although virtual home visits initially presented challenges with technology, home visitors rose to the occasion by implementing innovative strategies to help engage caregivers virtually and to share their expertise on child development.

In 2021, the American Rescue Plan appropriated almost \$1 million for Georgia home visiting programs to continue to support children and families affected by COVID-19. This will help support families with needed emergency supplies and resources, it will expand services in DeKalb and Muscogee Counties, and it will provide additional workforce development for Georgia's home visitors.



Strategies to Address COVID-19 Challenges



During the pandemic, home visiting staff expressed a desire for additional support. Supervisors in particular are balancing administrative duties, supporting staff development, and ensuring quality work while at the same time continuing to grow their own skills. Supervisors benefit from the time to pause and become more intentional about their work. Here's where coaching came in!

What is coaching?

Coaching is a process that mediates thinking and changes behavior. It does this by exploring thinking, perceptions, assumptions, and beliefs that influence decisions and actions every day. Coaching provides reflective space to clarify goals and integrate skills. Coaching can support the planning and/or reflection of a specific event or interaction. It can also occur over a period of time uncovering deeply held assumptions and beliefs that influence behavior and partnering in the development and achievement of goals.

In 2021, approximately 12 Georgia Parents as Teachers and Healthy Families Georgia staff participated in on-on-one monthly coaching sessions with Christine Zimmerman with Learning Works LLC. Coaching participants included supervisors, program managers, clinical supervisors, and home visitors. The purpose of the sessions was to help identify strengths and potential gaps in skills and knowledge and assist participants in developing measurable goals to increase performance and understanding in one or more of those areas.

Through coaching I've learned the importance of effective listening. I always thought I was a great listener, but I've learned how to be more of an active listener and more engaged in reflective sessions, virtual visits and staff meetings.

"Coaching helps me to gain perspective and learn new ways to tackle day to day problems with the day to day job. It helps me understand my employees' talents and strengths and how I can help them grow so it helps our program grow overall."

The goal of this project was to provide that support in a way that is empowering and long lasting. As a result of coaching, participants have reported increased skills in engaging staff and families, facilitating meetings and personal visits, paraphrasing, active listening, supporting families, and setting and achieving personal and professional goals. The experience was so impactful that a small group decided to meet together regularly on their to support and encourage each other as they continue reflecting on their own goals and building their skills.



Experience Joy

Experience joy while achieving high productivity.



Discover Solutions

Discover practical solutions for managing complex human systems.



Identify Strengths

Identify strengths creating a thriving team.



Inspire Confidence

Inspire confidence during times of change and growth.



Foster Adaptivity

Adapt forward momentum: engaging new productive patterns of behavior.



Embrace Growth

Experience professional development that drives growth & action.



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 in parents' own words that illustrate the power of home visiting!

Success Story: Shanice

Georgia Home Visiting Program
October 1, 2020 to September 30, 2021



My name is Shanice and I have been with Parents as Teachers for two years. Parents as Teachers has helped me in many ways. I have learned different ways to teach my son new things while having fun. It doesn't seem like a chore when they provide great activities for you and your child to complete.

Ms. Tawanna has been a blessing. My son has a speech delay and I feel he doesn't retain much of his school work. I received resources, specific activities to help reach the goal we set for him, and encouraging words that made me feel so much better about the situation. So not only has this program been beneficial to my son, its been an even greater blessing for me, especially mentally.

Going to school full time and being a single mother is draining physically and mentally. Therefore, being able to speak to Ms. Tawanna allowed me to vent about everything. She was always very insightful, giving me any resource she felt could help with any or all of my issues. She was always very considerate and I never felt judged. She always asked me about school and how I was feeling, I always left the conversation feeling better than I did that day.

My son will be five this year and it saddens me that he will no longer be apart of the program but I understand the reasoning behind it and I would gladly give up my spot so another mother and child can experience all the lovely things Parents as Teachers has to offer.

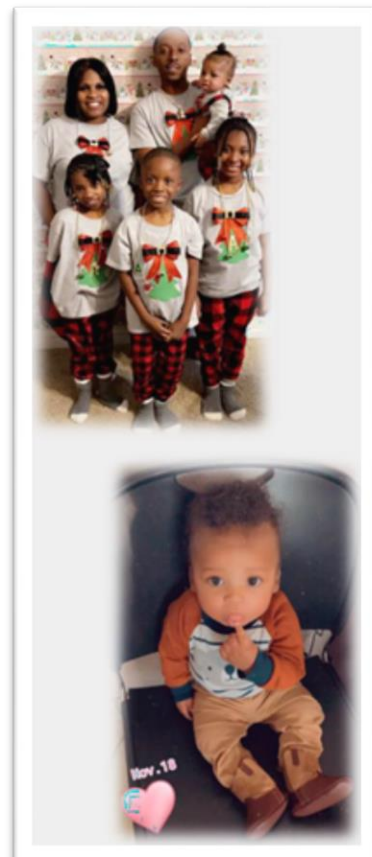
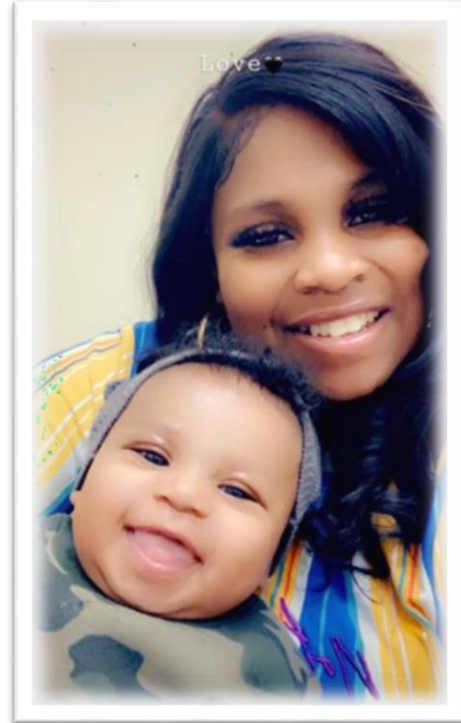
Parents as Teachers
United Way of Central Georgia
Macon, Georgia

Success Story: Tee and Daylen

Georgia Home Visiting Program
October 1, 2020 to September 30, 2021

My name is Tee and this is Daylen. We have been with Healthy Families for the last 5 months. This program has taught me how to have patience, how to put my baby on a schedule, and also encourages me to do self-care. I really enjoy my home visits. It helped me with my post-partum depression by looking forward to talking with someone outside of my household. Any time that my funds fall short they are there to give me items to help me in my time of need. Healthy Families also assisted me with resources to help pay for my light bill when my funds were low. My home visitor always has good spirits and listens to me well. She always gives good feedback and sends me good activity ideas to try with the baby. I was really happy during the holidays because they provided my kids with toys and bikes for Christmas. It brought joy to them because they were not expecting those gifts. I look forward to meeting with my home visitor every week because I anticipate the new information she is going to provide. What I love the most about Healthy Families is that they have all the resources to assist with what you may need on a day to day basis. We look forward to being in the program until graduation!

Healthy Families Georgia
Rainbow House Children's Resource Center
Warner Robins, Georgia



Success Story: The Cannon Family

Georgia Home Visiting Program

October 1, 2020 to September 30, 2021



I was led to the program because after 12 years of active addiction and losing my oldest two daughters, I had no idea how to interact with my youngest daughter. I am currently going on four years sober, and my youngest daughter is eight months old. When I was at the hospital, right after I had her, an advocate for the program came in and told me about Parents as Teachers. I knew I needed to sign up. I was clueless how to teach a child everything they need to know.

The greatest impact the program has had in my life is that I've gained so much confidence in my parenting and helping my children developmentally. While in the program, I have also started visitation with my oldest daughters and have learned how to have healthy connections with them. I plan to continue to stay in the program and learn everything they have to offer. In the next year, my goal is to regain full custody of my other two daughters.

Parents as Teachers
Advocates for Bartow's Children
Cartersville, Georgia

Success Story: Mon Sunar

Georgia Home Visiting Program
October 1, 2020 to September 30, 2021

Mon Sunar arrived in the United States in 2011 after leaving her home in Nepal and wanted to start her family after moving to Atlanta, Georgia in 2016. As a new mom beginning her life in a new country, Mon knew how important it was to be supported in raising her children. She began working with the New American Pathways Parents as Teachers (PAT) Program when her first child was just three months old. Through the program's lessons and techniques, she felt empowered to support her baby's early development through interactive play, singing and dancing, storytelling, reading, and talking with her child. Mon shared her gratitude for the program, saying that "without PAT, it would have been very difficult to raise my children" and feel confident they had access to everything they needed for early literacy and language learning.

After years of support from the New American Pathways PAT team, Mon's oldest child turned three and began preschool this year! She felt comforted by all of the early learning her and her toddler had done together over the years and knew her daughter's transition to schooling was much smoother because of their work with the PAT program. She has also been able to continue these daily practices



with their newest family member and second child who is now seven months old. Mon enjoys reading and telling stories to her children every night before bed.

Not only does she look forward to continuing to learn and grow with her children in the years to come through PAT, Mon also wants all of her friends and family to get involved in the program because it has made such a huge impact on her confidence as a mother! The ultimate reward for this program is when families share parenting skills they have learned through the program with others.

Parents as Teachers
New American Pathways
Atlanta, Georgia



MIECHV Program

Data Highlights

October 1, 2020– September 30, 2021



Home Visiting in Georgia

Fiscal Year 2021
MIECHV Program*

*Data collected from 10/1/2020-9/30/2021 for the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) programs.

19,958
Home Visits
Completed



1,477
children
served



181
pregnant
women
served



1,505
families
served



611
children
received
develop-
mental
screenings



439
women
screened
for
depression



377
adults
screened
for intimate
partner
violence



1,428
children
were read
to or sung
to daily



941
Low
income
homes
served



144
teen
parents
served



Home visiting supports pregnant women and at-risk families with children from birth to kindergarten entry.

Program Reach

Sixteen Counties Served: Bartow, Chatham, Chattahoochee, Clarke, Crisp, DeKalb, Dooly, Glynn, Houston, Jackson, Liberty, Muscogee, Peach, Richmond, Rockdale, Whitfield

Home Visiting Models



Program Highlights

94%

of caregivers were screened for depression within 3 months of enrollment or within 3 months of delivery.

97%

of children had a family member who read, told stories, and/or sang with them on a daily basis.

92%

of mothers received a postpartum visit with a healthcare provider within 8 weeks of delivery.

96%

of caregivers received intimate partner violence screening within 6 months of enrollment.

89%

of children practiced safe sleep and were always placed to sleep on their backs, without bed sharing or soft bedding.

Performance Measures

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 below). The 19 performance measures reflect a two-generation approach, aimed at improving the well-being of both caregivers and children.



Below 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.

Maternal and Newborn Health

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

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

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

Program in Action

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 10/1/20 to 9/30/21 that are funded by the Georgia Department of Public Health.

- ❖ 8% of women enrolled prenatally delivered preterm.
- ❖ 37% of mothers were breastfeeding their child at 6 months.
- ❖ 94% of primary caregivers were screened for depression.
- ❖ 83% of children received their last well child visit.
- ❖ 92% of mothers received a postpartum visit within 8 weeks of delivery.
- ❖ 96% of primary caregivers who used tobacco products at enrollment received a referral to cessation services.
- ❖ 89% of primary caregivers consistently practiced safe sleep methods with their infants.
- ❖ 2% of enrolled children had an injury related emergency department visit.
- ❖ 1% of children had an investigated case of maltreatment following enrollment.
- ❖ 82% of primary caregivers were specifically assessed for their parent-child interactions.
- ❖ 97% of children had someone who read or sang to them daily.
- ❖ 90% 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.
- ❖ 18% of primary caregivers who enrolled without a high school degree or GED subsequently enrolled in an educational program.
- ❖ 74% of primary caregivers had continuous health insurance coverage for at least 6 months of the year.
- ❖ 30% 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.
- ❖ 96% of primary caregivers who screened positive for intimate partner violence received referral information to appropriate community resources.

Program in Action

From October 2020 to September 2021, the Georgia Home Visiting program showed improvements in 13 of 19 performance measures. Improvements were strong in five 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; and (5) family economic self-sufficiency. The area of School Readiness and Achievement remained particularly strong throughout the entire time period under review. Changes in rates from the beginning to the end of the FY21 project comprise the following exemplars:

- The percentage of infants (among mothers who enrolled in home visiting prenatally) who were breastfed any amount at 6 months of age increased from 22% to 37%.
- Percent of mothers enrolled in home visiting prenatally or within 30 days after delivery who received a postpartum visit with a healthcare provider within 8 weeks of delivery increased from 69% to 92%.
- Percent of primary caregivers enrolled in home visiting who were screened for interpersonal violence (IPV) increased from 93% to 96%.
- Percent of primary caregivers enrolled in home visiting with positive screens for IPV who received referral information to IPV resources increased from 83% to 96%.
- The percentage of primary caregivers enrolled in home visiting who were screened for depression within three months of enrollment increased from 92% to 94%.
- The percentage of infants enrolled in home visiting who were always practiced safe sleep (placed to sleep on their backs without bed sharing or soft bedding) increased from 87% to 89%.
- The percentage of children who were screened in a timely manner for developmental delays increased from 88% to 90%.
- Of those children who screened positive for suspected developmental delay, the percentage of children who received services in a timely manner remained at 100%.

Georgia Home Visiting Program State Team

The Georgia Department of Public Health has an internal Home Visiting Team that provides administration and oversight of the Maternal, Infant and early Childhood Home Visiting (MIECHV) and non-MIECHV programs.

Georgia Department of Public Health

Home Visiting Team



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Home
Visiting
Director



Natasha Worthy
Home Visiting
Program
Manager



**Katrina
Brantley**
Community
Relations
Manager



**Mitzi
Fears**
Healthy Start
State Lead



**Wykinia
Culbreth**
Fatherhood
Initiative
State Lead

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.

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