


Maine MIECHV Program FY 2022

HRSA's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program


supports the [Maine Home Visiting Program](#) and provides voluntary, evidence-based home visiting programs for expectant and new parents with children through kindergarten entry age living in communities that are at-risk for poor maternal and child health outcomes¹.

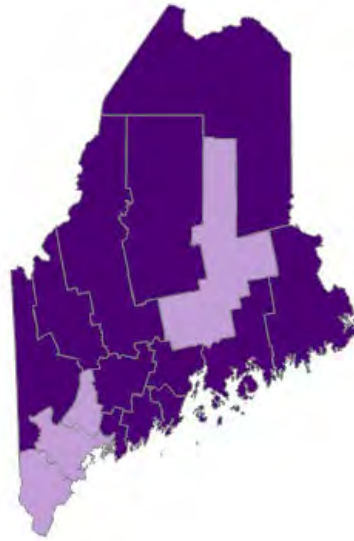
Maine MIECHV Program At-a-Glance

Rural counties by Funding Source:

 Both ARP¹& MIECHV: Aroostook, Franklin, Hancock, Kennebec, Knox, Lincoln, Oxford, Piscataquis, Sagadahoc, Somerset, Waldo, Washington

Non-rural counties by Funding Source:

 Both ARP & MIECHV: Androscoggin, Cumberland, Penobscot, York



Participants

3,654

Households

1,653

Home Visits

17,205

Maine Prioritizes Community Needs

MIECHV Program awardees tailor their programs to serve populations of need within their state. In Maine:

- **42.5%** of households were at or below 100% of the Federal Poverty Guidelines
- **2.7%** of households included a pregnant enrollee under age 21

Maine Performance Highlights

MIECHV Program awardees track and report improvements in MIECHV benchmark areas every year. Awardees are required by authorizing statute to demonstrate improvement in benchmark areas every three years. In the most recent assessment following FY 2020, the Maine MIECHV program successfully met the requirements for demonstration of improvement by improving in 5 of the 6 MIECHV [benchmark areas](#).

Evidence-Based Home Visiting Models in Maine

[Parents as Teachers \(PAT\)](#)

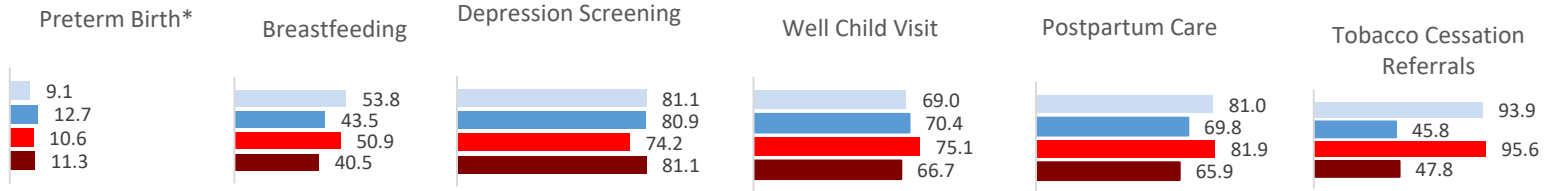
FY 2022 Performance Highlights Include:

- **Early Language and Literacy Activities: 96.7%** of children enrolled in home visiting had a family member who read, told stories, and/or sang with them on a daily basis. Children who are spoken to frequently by their caregivers have larger vocabularies and literacy skills, which are linked to later academic, social, and cognitive functioning.
- **Continuity of Insurance Coverage: 95.2%** of caregivers enrolled in home visiting had continuous health insurance coverage for at least 6 consecutive months. Home visitors can offer resources to support families to enroll in and maintain health insurance coverage. Continuity of insurance coverage is critical during the postpartum period, as one-third of pregnancy-related deaths occur between one week and one year postpartum.

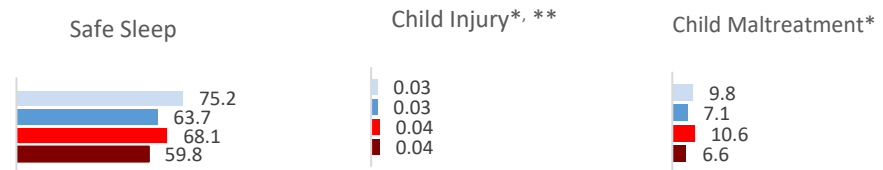
¹ HRSA awarded ARP ([American Rescue Plan Act](#)) funds to current MIECHV awardees to address the needs of families in response to the COVID-19 pandemic.

Maine MIECHV Performance Measurement Data Compared to MIECHV Averages²

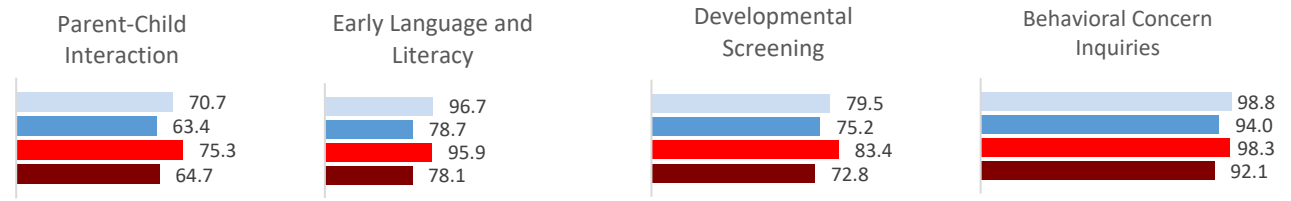
Benchmark Area 1 – Maternal and Newborn Health Outcomes



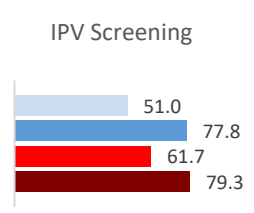
Benchmark Area 2 – Child Injuries, Abuse, Neglect, and Maltreatment and Emergency Department Visits



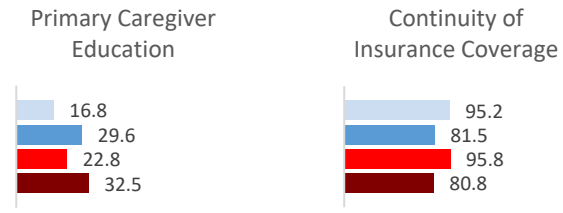
Benchmark Area 3 – School Readiness and Achievement



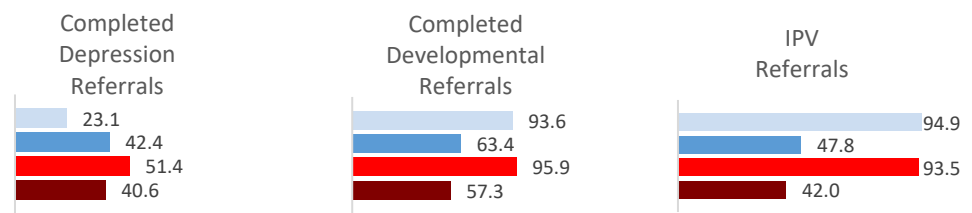
Benchmark Area 4 – Crime or Domestic Violence



Benchmark Area 5 – Family Economic Self-Sufficiency



Benchmark Area 6 – Coordination and Referrals for Other Community Resources and Supports



■ Maine MIECHV (FY 2022) ■ Maine MIECHV Rolling Average (FY 2019- FY 2021)
■ MIECHV National Average (FY 2022) ■ MIECHV National Rolling Average (FY 2019- FY 2021)

² Comparison to a three-year average minimizes the effects of outliers or potential data reporting issues specific to one year.
 * Direction for improvement in performance is downwards. **Child Injury reported as a rate