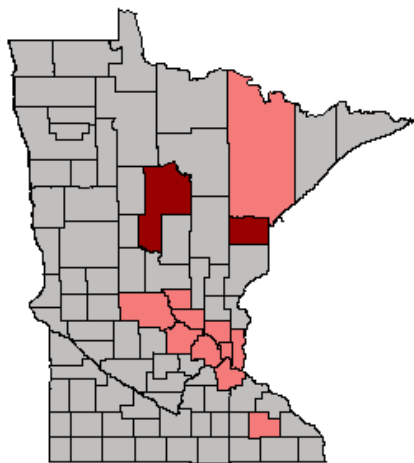


HRSA's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program

supports the [Minnesota 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.

Evidence-Based Home Visiting Models in Minnesota: [Healthy Families America \(HFA\)](#), [Maternal Early Childhood Sustained Home-Visiting Program \(MECSH\)](#), [Nurse-Family Partnership \(NFP\)](#), [Parents as Teachers \(PAT\)](#)

Minnesota MIECHV Program At-a-Glance



■ Rural Counties²:

Carlton, Cass

■ Non-Rural Counties²:

Anoka, Benton, Dakota, Hennepin, Olmsted, Ramsey, Saint Louis, Sherburne, Stearns, Washington, Wright

Participants

3,920

Households

2,077

Home Visits

21,926

Minnesota Prioritizes Community Needs

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

- **91.1%** of households were at or below 200% of the Federal Poverty Guidelines and **64.2%** were at or below 100% of those guidelines.
- **6.9%** of households included a pregnant enrollee under age 21

Minnesota 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 2023, the Minnesota MIECHV program successfully met the requirements for demonstration of improvement by improving in 5 of the 6 [benchmark areas](#).

FY 2023 Performance Highlights Include:

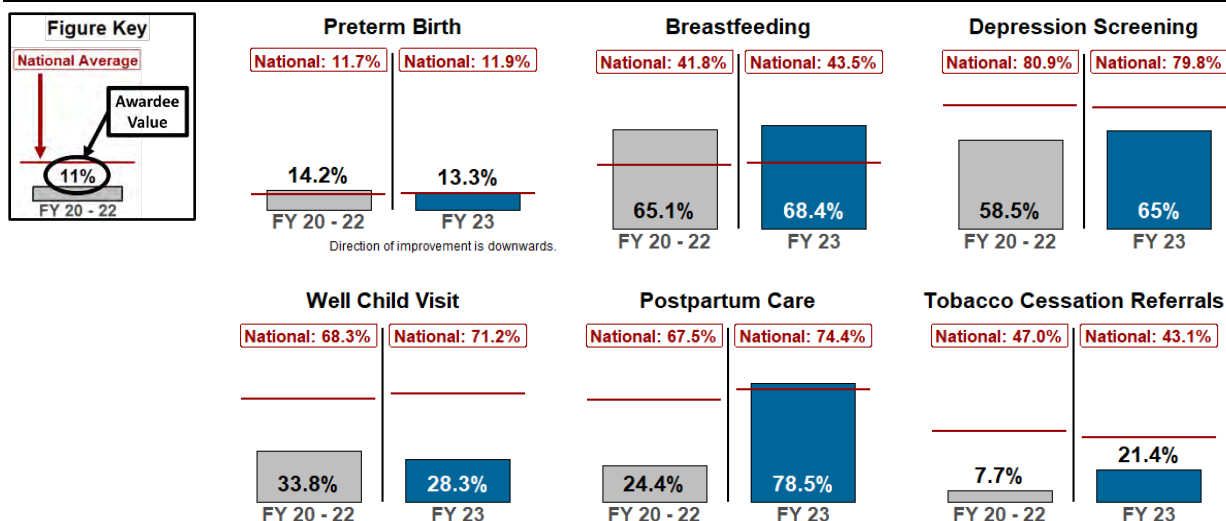
- **MECSH Reflective Supervision Guidance:** Minnesota's MIECHV MECSH Program updated best-practice guidance for reflective supervision following a comprehensive review of existing literature and an analysis of data collected from listening sessions and surveys completed by Minnesotan home visitors and supervisors, with a comparison of other evidence-based home visiting models' requirements.
- **Early Language and Literacy Activities:** 96.9% 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.

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.

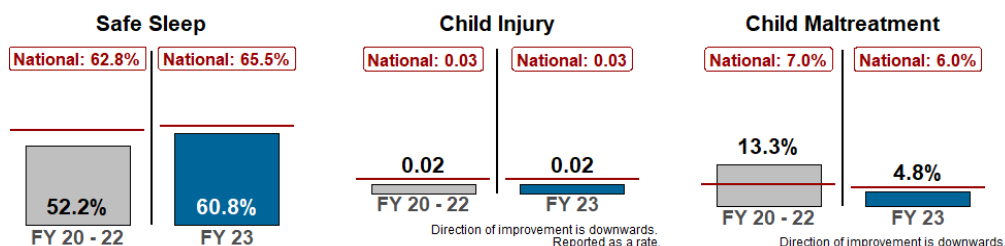
² These counties were served by MIECHV formula funds, ARP funds, or both.

Minnesota MIECHV Performance Data Compared to National MIECHV Averages

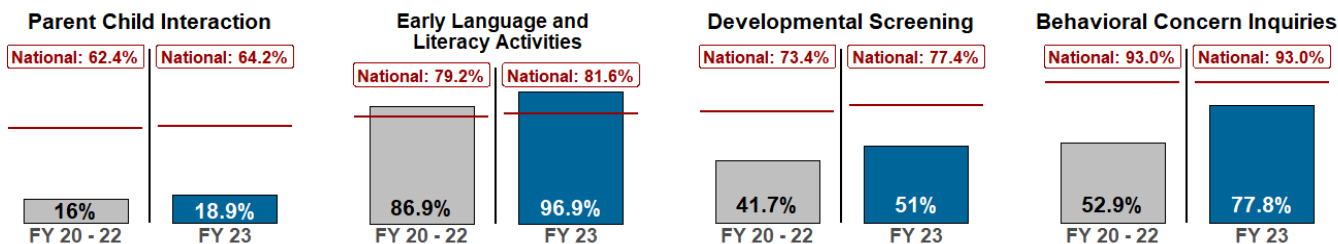
Benchmark Area 1: Maternal and Newborn Health Outcomes



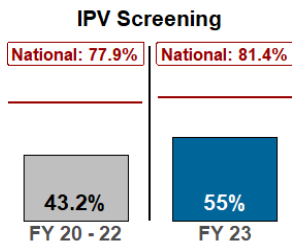
Benchmark Area 2: Child Injuries, Maltreatment, and Emergency Department Visits



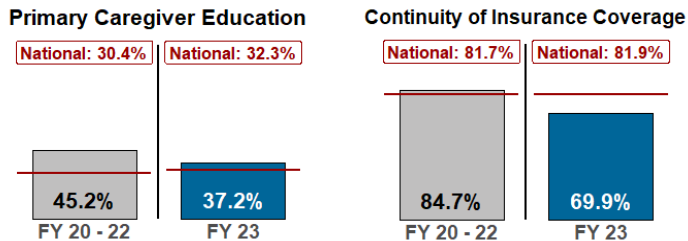
Benchmark Area 3: School Readiness and Achievement



Benchmark Area 4: Crime or Domestic Violence



Benchmark Area 5: Family Economic Self Sufficiency



Benchmark Area 6: Coordination and Referrals

