

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

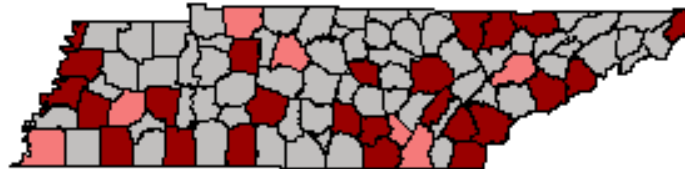
supports the [Tennessee Home Visiting Program](#) and provides voluntary, evidence-based home visiting programs for expectant and new parents with children through kindergarten entry age living in communities that are at-risk for poor maternal and child health outcomes¹.

Evidence-Based Home Visiting Models in Tennessee: [Healthy Families America \(HFA\)](#), [Parents as Teachers \(PAT\)](#)

Tennessee MIECHV Program At-a-Glance

Rural Counties²: Campbell, Claiborne, Cocke, Coffee, Cumberland, Dekalb, Dickson, Dyer, Grundy, Hardeman, Hardin, Haywood, Henderson, Johnson, Lake, Lauderdale, Lawrence, McMinn, Marion, Maury, Monroe, Polk, Rhea, Scott, Sevier

Non-Rural Counties²: Davidson, Hamilton, Knox, Madison, Montgomery, Sequatchie, Shelby



Participants

2,753

Households

1,374

Home Visits

19,445

Tennessee Prioritizes Community Needs

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

- **92.6%** of households were at or below 200% of the Federal Poverty Guidelines and **71.8%** were at or below 100% of those guidelines.
- **5.8%** of households included a pregnant enrollee under age 21

Tennessee 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 Tennessee MIECHV program successfully met the requirements for demonstration of improvement by improving in all 6 [benchmark areas](#).

FY 2023 Performance Highlights Include:

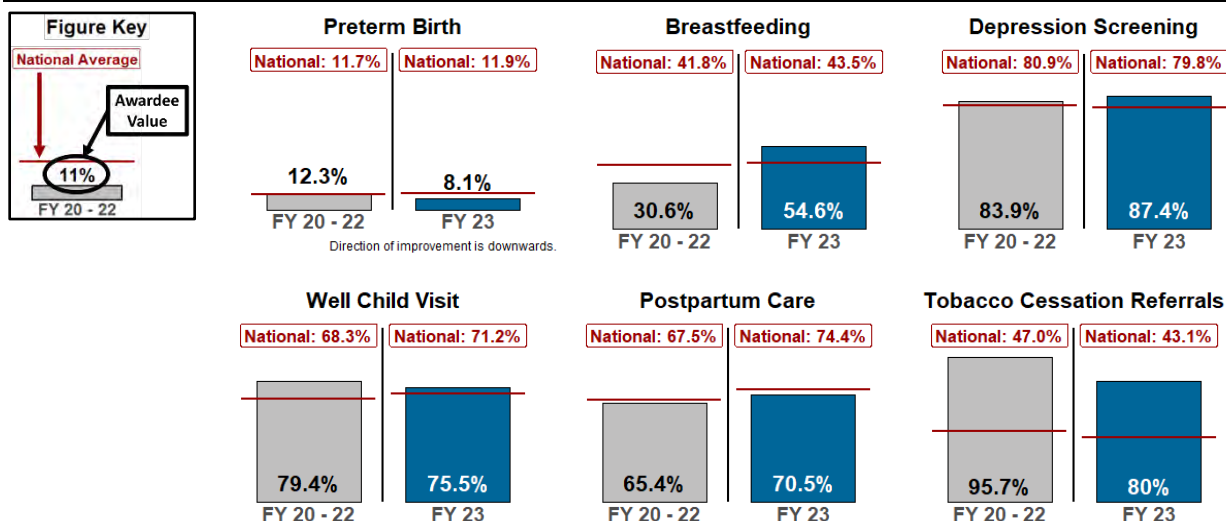
- **Intimate Partner Violence (IPV) Screening:** 94.1% of caregivers enrolled in home visiting were screened for IPV within 6 months of enrollment. IPV is associated with adverse physical and mental health outcomes. Children exposed to IPV are at a higher risk of abuse and neglect and may be more likely to experience certain health and behavioral problems, such as elevated blood pressure, sleep issues, anxiety, and depression.
- **Depression Screening:** 87.4% of caregivers enrolled in home visiting were screened for depression within 3 months of enrollment or within 3 months of delivery. Research shows that postpartum depression can be associated with a number of adverse outcomes for both the mother and infant, such as poor parent-child bonding, negative parenting approaches, and increased risk of developmental, health, and safety concerns for the child.

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.

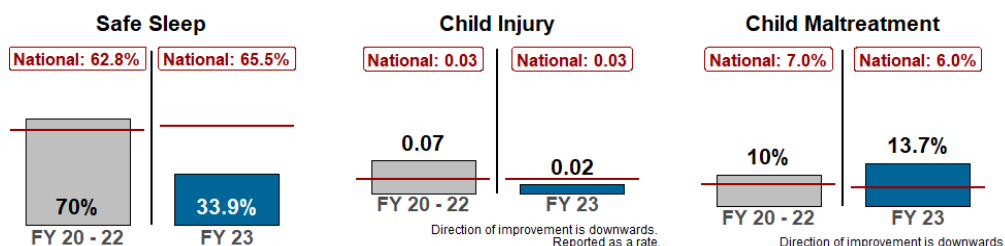
² These counties were served by MIECHV formula funds, ARP funds, or both.

Tennessee MIECHV Performance Data Compared to National MIECHV Averages

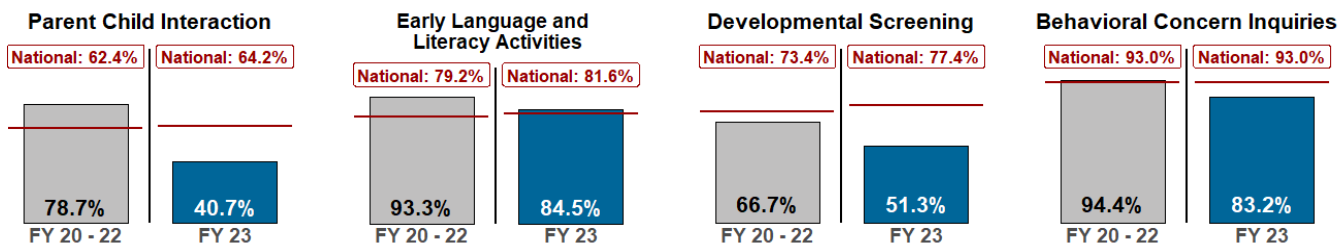
Benchmark Area 1: Maternal and Newborn Health Outcomes



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

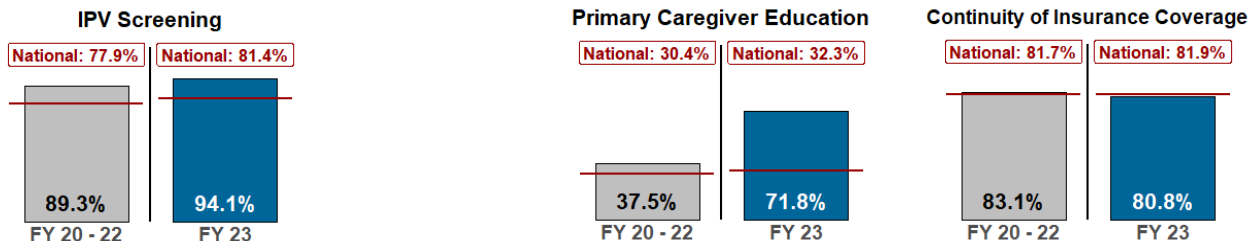


Benchmark Area 3: School Readiness and Achievement



Benchmark Area 4: Crime or Domestic Violence

Benchmark Area 5: Family Economic Self Sufficiency



Benchmark Area 6: Coordination and Referrals

