



Massachusetts: Maternal, Infant, and Early Childhood Home Visiting Program

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The federal Maternal, Infant, and Early Childhood Home Visiting, or MIECHV, program provides Massachusetts with the resources to expand its evidence-based home visiting programs. Prior to receiving federal support, Massachusetts invested in a state-level infrastructure of services to support early childhood development, including home visiting. Massachusetts administrators use MIECHV funds to serve more children and families in high-risk communities with evidence-based home visiting programs and to provide evidence-based enhancements such as Moving Beyond Depression, or MBD, and Parents Together. Additionally, Massachusetts uses MIECHV funds to support systems-building initiatives, provide training and support, and operationalize evaluation and data collection.

Success and innovation

Implementation teams to expand services

The Massachusetts Department of Public Health contracts with local social service agencies to implement national home visiting models with fidelity. In order to effectively coordinate the use of MIECHV funds, Massachusetts created a State Level Leadership Team that is divided into six implementation teams individually focused on: systems building; expansion of the national home visiting models; sustainability; training; evaluation, data, and reporting; and universal one-time home visiting, the Welcome Family program. This strategy allowed the state to identify service gaps and provide services to families who do not qualify for state-funded home visiting.



Massachusetts MIECHV at a glance

Total federal MIECHV funding:

\$8.7 million in competitive grant funds and \$1.3 million in formula grant funds in 2014

Lead agency:

Massachusetts Department of Public Health

Number of communities served:

17 communities

MIECHV-funded home visiting models:

Early Head Start-Home Visiting, or EHS-HV; Healthy Families America, or HFA; Healthy Steps; and Parents as Teachers, or PAT; in addition, as part of their systems building activities, Massachusetts is piloting a one-time nurse visit, Welcome Family, for families giving birth in four communities—Boston, Fall River, Lowell, and Lawrence

Pilot and evaluate universal one-time home visiting initiative

Massachusetts directed a portion of its MIECHV funds to designing, implementing, and evaluating Welcome Family, an innovative systems-building program that is undergoing rigorous evaluation. Welcome Family was created in Massachusetts in order to provide a universal, one-time home visit to all new mothers. In a very short timeframe, Massachusetts was able to create and scale up Welcome Family to serve families in four of the MIECHV communities, with the goal of expanding the program statewide. An evaluation of the implementation and effectiveness of the pilot is currently underway.

Provide services to address maternal mental health

Massachusetts identified a need to support mothers experiencing clinical depression and has responded to that need by implementing the Moving Beyond Depression, or MBD, In-Home Cognitive Behavioral Therapy program. MBD, housed at local community mental health centers, is an enhancement for home visiting models, which routinely screen participating mothers for maternal depression. If they are eligible for MBD, mothers can receive up to 15 in-home therapy sessions with a licensed mental health clinician to address their depression. Eventually, Massachusetts hopes to provide this service statewide.

Evaluation and data collection

MIECHV funds allowed state administrators to partner with local higher education institutions to collect data, provide analysis, and conduct evaluations of the state's home visiting initiatives. Researchers at these institutions are currently working to evaluate the overall system of home visiting in Massachusetts, analyze longitudinal data from Healthy Families participants to determine the long-term effectiveness of the program, and provide a rigorous evaluation of Welcome Family. In order to collect benchmark data, Massachusetts worked with model developers to create a data system that interfaces with their respective models and provides uniform data to the state for analysis. By improving collection and evaluation processes, the state can now use data to inform policy decisions and improve service delivery on an ongoing basis.

Challenges

One of the major challenges for Massachusetts was expanding home visiting services—including creating and piloting Welcome Family—on a tight timeline while simultaneously ensuring fidelity to the national models and updating data collection systems to track benchmarks. MIECHV funds have been a critical funding source for both the direct expansion of services to clients and infrastructure support. Uncertainty about the sustainability of MIECHV funds has made it difficult for the state to plan for ongoing expansion of home visiting. State administrators reported that it will be difficult to measure the extent of the systems-building work in Massachusetts because the majority of data collection in national evaluations reflects client-level—not systems-level—outcomes.

Massachusetts MIECHV at a glance

Families served:

evidence-based home visiting served 2,260 families, Welcome Family served 453 families, and Moving Beyond Depression, or MBD, served 85 families

Additional funding for home visiting:

state appropriations for Healthy Families Massachusetts; Early Intervention Partnership Program, or EIPP; the Maternal Child Health, or MCH, Block Grant from the Maternal and Child Health branch, or MCHB, of the Health Resources and Services Administration, or HRSA, which supports emerging practice

Identified risks targeted by MIECHV:

substance abuse; mental health; child abuse and neglect; domestic violence; communities with high rates of infant mortality; filling service gaps; addressing program accessibility; and MIECHV uses strengthening families to provide a strength-based approach to working with families

Looking ahead

Develop strategies for sustaining gains

Massachusetts is working to ensure sustainability of the home visiting systems and service capacity by identifying strategies to leverage additional funding sources. The MIECHV implementation team working on sustainability is also considering strategies for integrating home visiting as a reimbursable service in local health care systems.

Continue to expand, evaluate, and integrate home visiting

Massachusetts is planning to support more families by expanding its home visiting initiatives, with a particular goal of providing Welcome Family statewide. Administrators are in the process of evaluating data in order to identify the impact of MIECHV funding on service delivery and systems building. Finally, the Massachusetts Department of Public Health, in collaboration with other state agencies and stakeholders, is working to develop a continuum of services—including home visiting—that supports the healthy development of young children in Massachusetts.

Additional information

Massachusetts's MIECHV program on the Executive Office of Health and Human Services' website: www.mass.gov/dph/homevisiting

For information on Massachusetts's MIECHV Needs Assessment, please contact Claudia Catalano at Claudia.Catalano@state.ma.us or Snaz Pierre at Snaltze.pierre@state.ma.us

For information on Massachusetts's MIECHV State Plan, please contact Claudia Catalano at Claudia.Catalano@state.ma.us or Snaz Pierre at Snaltze.pierre@state.ma.us

Source: Interviews with Ron Benham, director, Massachusetts Bureau of Family Health and Nutrition, October 2014; Karin Downs, assistant division director for Clinical Affairs, Massachusetts Department of Public Health, October 2014; Claudia Catalano, co-program director for the Massachusetts MIECHV, Massachusetts Department of Public Health, October 2014; Snaz Pierre, co-program director for the Massachusetts MIECHV, Massachusetts Department of Public Health, October 2014; Beth Buxton, program director, Massachusetts Department of Public Health, October 2014; Susan Manning, maternal child health epidemiologist CDC assignee, Massachusetts Department of Public Health, October 2014; Katie Stetler, CDC public health prevention service fellow, Massachusetts Department of Public Health, October 2014.

“We have been able to weave together relationships that existed into a cohesive model that allows them to provide a broad array of services. There is more of a team identity.”
– Massachusetts state administrator

This profile was written as part of a larger study to identify how states are using Maternal, Infant, and Early Childhood Home Visiting, or MIECHV, funds to advance state home visiting systems. For a summary report and additional profiles about home visiting, visit clasp.org or americanprogress.org.