

# Maternal, Infant and Early Childhood Home Visiting Evaluation (MIHOPE), 2011-2015

On March 23, 2010, the President signed into law the Patient Protection and Affordable Care Act of 2010 (PPACA) (P.L. 111-148). The law authorized the creation of the Maternal, Infant, and Early Childhood Home Visiting Program to address the diverse needs of children and families in communities at risk through collaboration and partnership at the Federal, State, and community levels to improve health and development outcomes for at-risk children through evidence-based home visiting programs. The program is jointly administered by the Health Resources and Services Administration and ACF.

The purpose of the Maternal, Infant, and Early Childhood Home Visiting Evaluation (MIHOPE) contract is to conduct the legislatively mandated evaluation of the Home Visiting program involving multiple tasks and activities that together will provide federal and state policymakers, service providers, and other interested parties with valuable information about the effectiveness of these federally funded programs in improving outcomes for children and families. Tasks are designed to yield information and lessons about operating such programs and the challenges faced and addressed during implementation and throughout the operation of the program.

**The Study.** The study includes: an *analysis of the state needs assessments* that were provided in the state MIECHV applications; an *effectiveness study* that includes an impact analysis to measure what difference home visiting programs make for the at-risk families they serve, focusing on areas like prenatal, maternal, and newborn health, child development, parenting, domestic violence, and referrals and service coordination. The effectiveness study will also include an implementation analysis that will examine how the program models operate in their local and state contexts and describe the families who participate; and an *economic analysis* that will examine the financial costs of operating the programs. A special goal of this study is the linking of implementation strategies to program impacts, thus informing the field about the types of program features or strategies that might lead to even greater impacts on families. For example, understanding how, and at what level, the average family participates in the program will provide context to any variation in impacts we find in the health of families. The primary data used in the study are expected to be collected by the research team through surveys, review of administrative records, interviews, observations, and staff logs.

Sites in the evaluation will operate one of four models that meet HHS' criteria for evidence-based models and were chosen by at least 10 states for their MIECHV programs: Early Head Start – Home Visiting, Healthy Families America, Nurse Family Partnership, and Parents as Teachers. Approximately 85 local home visiting program sites in 12 states are expected to be selected to participate. Among families who are eligible for the study, random assignment will be used to select which families to enroll in home visiting services.

**Project Timeline.** Study enrollment and data collection will begin in 2012. Data gathered from the initial information provided by families and staff will be published in a report to Congress in 2015. There are plans for follow up through 2018.

The contract was awarded to MDRC with subcontracts to James Bell Associates, Johns Hopkins University, Mathematica Policy Research, University of Georgia and a number of academic consultants. This project is being led by the Administration for Children and Families in collaboration with the Health Resources and Services Administration.

The point of contact is Lauren Supplee.