

Administration for Children and Families Programs and Potential Pathways to Prevention of Preterm Births

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Administration for Children and Families

Selected Services and Evaluations

- Early Head Start
- Homevisiting:
 - MIHOPE
 - MIHOPE Strong Start
 - Tribal Homevisiting
- Adolescent Pregnancy Prevention Program
- Pathways to Responsible Fatherhood
Demonstration Grant Program

Early Head Start and Pregnancy Support

Early Head Start Services Today

- Serves children from birth to age 3 and pregnant women
- 150,094 children enrolled in 2012-13 program year (111,104 slots)
- 15,457 pregnant women enrolled during the same period
- 916 EHS grants nationwide

EHS and Pregnant Women

- Early Head Starts provide early care and education to infants and toddlers and provide a broad range of supports to their low income families
- Enrolling pregnant women enables Early Head Start programs to begin providing services during a critical period in a family's life. Pregnant women comprise a small but important proportion of Early Head Start participants (about 9 percent in 2013–2014);

http://eclkc.ohs.acf.hhs.gov/hslc/data/psr/2014/NATIONAL_SNAPSHOT_EHS

[.pdf](#). Additionally, according to the 2009 Program Information Report, 86 percent of Early Head Start programs enrolled pregnant women.

EHS and Pregnant Women

- Based on a national descriptive study (BABY FACES 2009), most families who enrolled in Early Head Start during pregnancy did so during the second trimester (46 percent), and the remaining families enrolled in either the first or third trimester (27 percent for each).

Early Head Start

Selected Office of Head Start resources for Early Head Starts that are serving pregnant women

- **Should EHS Programs Enroll Pregnant Women/Expectant Families? Early Head Start Tip Sheet No. 15**
- **EHS Tip Sheet No. 49: Can We Continue to Serve a Family After Pregnancy Loss?**
- **Early Essentials: Working with Expectant Families**
- **Sensitivity, Screening, and Support: Talking with Expectant Families about Substance Abuse**
- **Nutrition Tips for a Healthy Pregnancy**

Early Head Start: Links

- LINKS TO SELECT RESOURCES
- Should EHS Programs Enroll Pregnant Women/Expectant Families? Early Head Start Tip Sheet No. 15
- <https://eclkc.ohs.acf.hhs.gov/hslc/tta-system/ehsnrc/comp/pregnant-women/ShouldEHSProgra.htm>
- **EHS Tip Sheet No. 49: Can We Continue to Serve a Family After Pregnancy Loss?**
- <https://eclkc.ohs.acf.hhs.gov/hslc/tta-system/ehsnrc/comp/pregnant-women/TipSheet49.htm>
- **Early Essentials: Working with Expectant Families**
- <https://eclkc.ohs.acf.hhs.gov/hslc/tta-system/ehsnrc/docs/QS-expectantfams.pdf>
- **Sensitivity, Screening, and Support: Talking with Expectant Families about Substance Abuse**
- <https://eclkc.ohs.acf.hhs.gov/hslc/tta-system/ehsnrc/comp/pregnant-women/SensitivityScre.htm>
- **Nutrition Tips for a Healthy Pregnancy**
- <https://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health/health-literacy-family-engagement/prenatal-postpartum/duplicateNutriti.htm>

EHS and Pregnant Women: NEW Research Brief to be Released

- Exploring demographic and risk factor comparisons between those who enrolled earlier in pregnancy and those who enrolled later
- Data from BABY FACES (2009)
- Full brief to be released by Fall, 2015

Watch the OPRE website for **“Women and Families Enrolled in Early Head Start During Pregnancy”**

MIHOPE

- Mother and Infant Home Visiting Program Evaluation
- Legislatively-mandated, national evaluation of MIECHV
- Legislative requirements:
 - Use a rigorous design for assessing effectiveness overall and variations across programs and populations
 - Reflect the national diversity of communities and populations
 - Learn about effectiveness of home visiting in all outcome domains mentioned in authorizing legislation
- Additional goals:
 - Gain information to strengthen future programs

MIHOPE: Main Components

- State needs assessments analysis
- Random assignment impact study
- Multi-level implementation study
- Cost Effectiveness study

MIHOPE: Overarching Research Questions

- What are the effects of MIECHV-funded programs?
 - Across all domains of interest?
 - Measured consistently across evidence-based model?
- How do effects vary for different groups of families and different groups of programs?
- How do programs operate? How adequate are implementation systems?
- What is the relationship between features of local programs and implementation systems and their effects?
- What are the costs to deliver home visiting services and to achieve key impacts?

MIHOPE: Research Partners

- Sponsored by Health Resources and Services Administration (HRSA) and the Office of Planning, Research, and Evaluation (OPRE), Administration for Children and Families, HHS
- Conducted by MDRC, James Bell Associates, Johns Hopkins University, Mathematica Policy Research, the University of Georgia, and Columbia University

MIHOPE: Process and Key Dates

- Collection of baseline family data – 2012-2015
- Collection of 15-month follow-up data – 2014-2017
- Collection of implementation data – 2012-2017
- Report to Congress submitted February 2015
- Implementation Final Report – early 2018
- Impact and Impact Variation Final Report – late 2018

MIHOPE-Strong Start

Part of CMS's Strong Start initiative:

- Can nonmedical prenatal interventions (in addition to routine medical care) improve health outcomes and health care use and decrease health care costs?
- 4-year initiative of CMS testing 4 interventions: Centering/Group Visits, Birth Centers, Maternity Care Homes, and home visiting

MIHOPE-Strong Start: Design

- Random assignment impact study
- Implementation study
- Examining the effects of home visiting on:
 - Birth outcomes
 - Maternal and infant health care utilization
 - Health care costs

MIHOPE-Strong Start: Research Partners

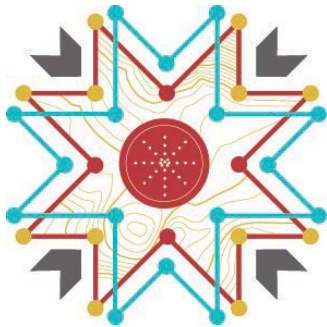
- Centers for Medicare and Medicaid Services (CMS), the Administration for Children and Families (ACF), and the Health Resources and Services Administration (HRSA)
- Study overseen by ACF's Office of Planning, Research and Evaluation (OPRE)
- Conducted by MDRC, James Bell Associates, Johns Hopkins University, and Mathematica Policy Research

MIHOPE-Strong Start: Research Questions

- What is the impact of home visiting programs on birth outcomes, maternal and infant health, and health care use up to the first year postpartum?
- How do impacts vary for key subgroups (i.e., smokers, teens)?
- How is each evidence-based service model defined, and how do local programs specify or adapt their service models?
- How do programs' inputs (i.e., extent of focus on birth outcomes, family characteristics, staff attributes) relate to achieved outputs (in particular, the dosage of services received and referrals provided)?
- How do home visiting programs using these two evidence-based models achieve their results?

MIHOPE-Strong Start: Timeline

- Site recruitment – 2012-2015
- Participant enrollment – 2014-2015
- 5 reports:
 - Design Report – released July 2015
 - First Annual Report – released January 2014
 - Second Annual Report – released Jan. 2015
 - Third Annual Report – anticipated April 2016
 - Final Report – anticipated end of 2017



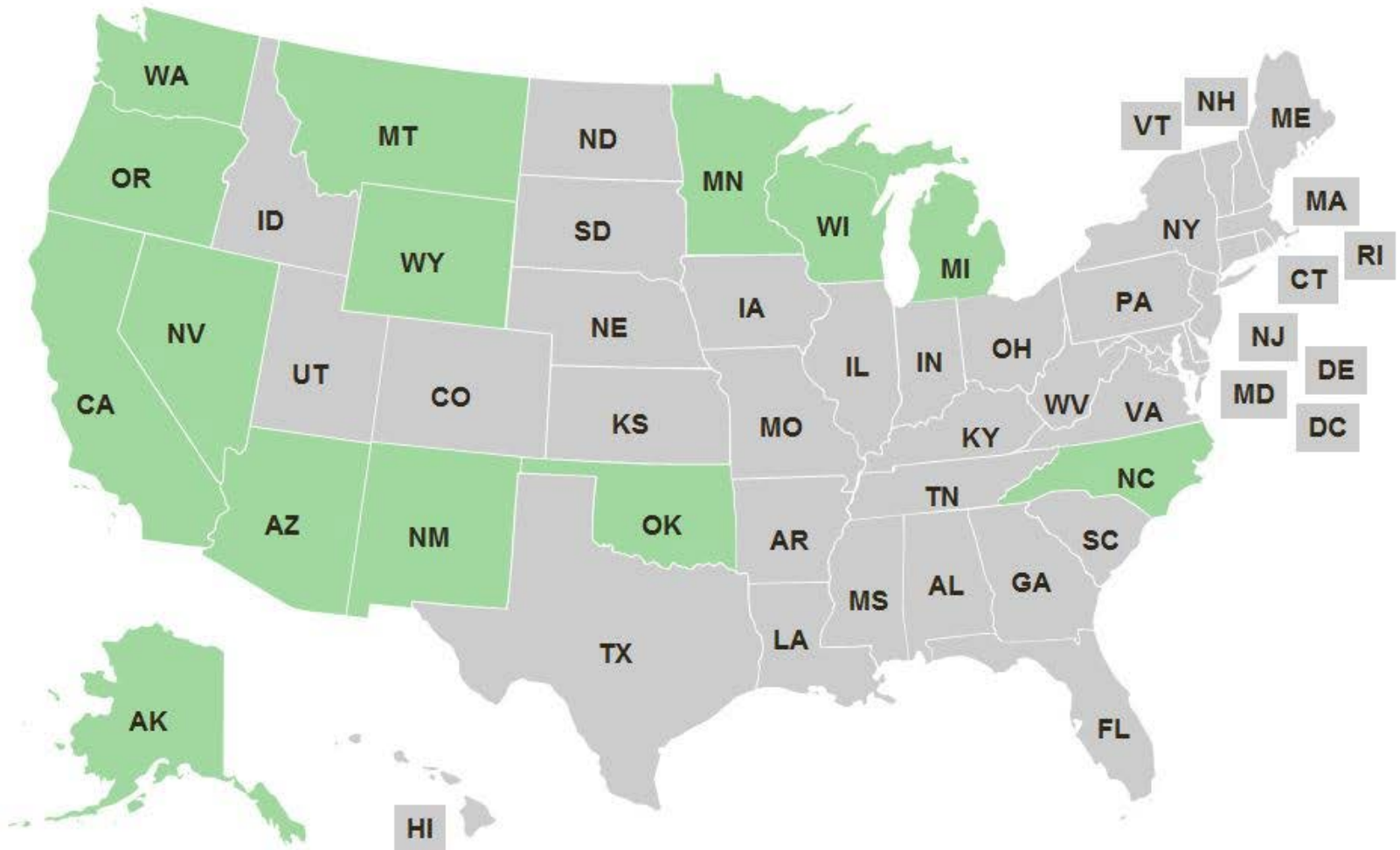
TRIBAL HOME VISITING



- Part of Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Program - \$1.9 million between FY 2010 and FY 2015
- 3 percent set-aside for grants to Indian tribes, consortia of tribes, tribal organizations, and urban Indian organizations
- Administered by ACF in collaboration with HRSA
- \$56 million in Tribal Home Visiting funds awarded to date
 - 25 grantees, 3 cohorts, 14 states
 - Awarded competitively
 - State MIECHV also funds tribal communities
- Reauthorized in FY 2016 and 2017 at \$400 million annual level

Map of Tribal Home Visiting Grantees

Tribal Home Visiting Grantees



Tribal Home Visiting Program Goals

- Supporting the development of healthy, happy, and successful AIAN children and families
- Implementing high-quality, culturally-relevant, evidence-based home visiting programs in AIAN communities
- Expanding the evidence base around home visiting interventions for Native populations
- Supporting and strengthening cooperation and coordination and promoting linkages among early childhood programs and coordinated early childhood systems

Tribal Home Visiting Grant Activities

- Conduct a needs and readiness assessment of at-risk communities (Year I)
- Engage in collaborative planning and capacity building efforts to address identified needs through a home visiting program
- Provide high-quality, culturally relevant, voluntary, evidence-based home visiting services to families in at-risk communities
- Establish, measure, and report on progress toward meeting “benchmarks” performance measures for participating children and families
- Conduct rigorous local evaluations to answer questions of importance to tribal communities and build the evidence base for home visiting programs with AIAN populations

ACF's Adolescent Pregnancy Prevention Program

Personal Responsibility Education Program Innovative Strategies, or PREIS,

- Lebretia White, MSW, LGSW
Federal Program Manager
- Innovative Strategies to prevent pregnancy
- among youth ages 10-19
- who are homeless, in foster care, live in rural areas or in geographic areas with high teen birth rates,
- or come from racial or ethnic minority groups,
- as well as pregnant and parenting youth under the age of 21.

ACF's Adolescent Pregnancy Prevention Program: PREIS

- The PREIS funded programs use rigorous research designs to validate new and promising approaches to serving young people who may have unmet needs or belong to uniquely vulnerable populations at risk for unplanned pregnancy or sexually transmitted infections (STIs). Many of the program participants are from populations that are disproportionately at risk of preterm labor and infant mortality.

Adolescent Pregnancy Prevention Program: CPRES

- **Competitive Personal Responsibility Education Programs** are discretionary pregnancy prevention projects implemented by community-based organizations in 10 jurisdictions. One project in Texas serves pregnant and parenting teens and is conducting a rigorous research program to test and validate their model intervention. That project, Healthy Families San Angelo, is highlighted below.

- Three PREIS and one CPRES grant focus pregnancy outcomes
- Teen Outreach Pregnancy Services, Tucson, AZ
- Children's Hospital Los Angeles
- Ohio Health Research and Innovation Institute
- Healthy Families San Angelo

Example APPProject

- **Healthy Families San Angelo**
- **San Angelo, TX**
- Steps to Success Family Coaches visit prenatal mothers and fathers weekly to assure regular and compliant utilization of prenatal care and decrease pre-term, low weight babies. Home visits focus on what to expect during each stage of pregnancy, maternal nutrition, relationship issues, and decreasing risky behaviors by both parents. Depending on the family's needs, they may also be connected to additional services such as financial, food, and housing assistance programs, job training programs, family support centers, substance abuse treatment programs, and domestic violence shelters.

ACF's Responsible Fatherhood and Pregnancy

Office of Family Assistance,

Charisse Johnson , Branch Chief of OFA

Discretionary Grant Program

Pathways to Responsible Fatherhood Demonstration Grants

A few of the projects include support of fathers
and families during pregnancy

ACF's Homevisiting Approaches to Father Engagement and Fathers' Experiences Study

- <http://www.acf.hhs.gov/programs/opre/research/project/home-visiting-approaches-to-father-en>
- Qualitative study
- Innovations in existing homevisiting programs to actively engage fathers
 - program operators' successes and challenges
 - the views and opinions of fathers who have been invited to participated
 - lessons for other programs interested in more fully engaging men in their programs.

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