

2020 HOME VISITING NEEDS ASSESSMENT

ALLEGAN COUNTY



KEY DEMOGRAPHICS & CULTURAL CHARACTERISTICS

118,081
TOTAL POPULATION

1,432
BIRTHS PER YEAR

6%
UNDER 5 YEARS

3%
FOREIGN BORN

6% SPEAK A LANGUAGE OTHER THAN ENGLISH IN THEIR HOME

94%
HAVE HEALTH INSURANCE

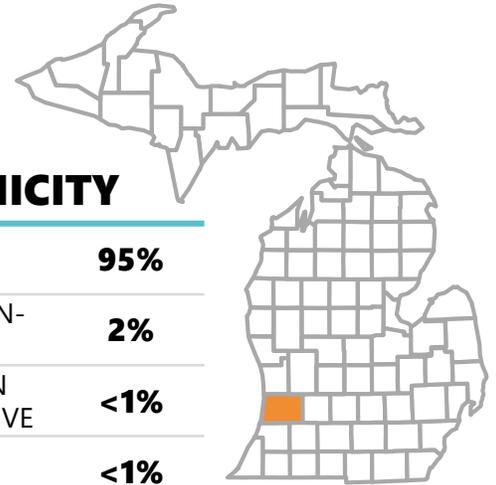
76% OF HOUSEHOLDS HAVE INTERNET ACCESS

91% OF ADULTS 25+ ARE HIGH SCHOOL GRADS



RACE/ETHNICITY

WHITE	95%
BLACK OR AFRICAN-AMERICAN	2%
AMERICAN INDIAN AND ALASKA NATIVE	<1%
ASIAN	<1%
NATIVE HAWAIIAN	0%
MULTIRACIAL	2%
HISPANIC OR LATINO	7%
WHITE, NOT HISPANIC OR LATINO	88%



ALLEGAN COUNTY

\$59,883
MEDIAN HOUSEHOLD INCOME

OUTCOMES IMPACTED BY HOME VISITING

COUNTY PRIORITIES

- MATERNAL HEALTH
- CHILD HEALTH
- CHILD DEVELOPMENT & SCHOOL READINESS
- POSITIVE PARENTING PRACTICES
- CHILD MALTREATMENT
- FAMILY ECONOMIC SELF-SUFFICIENCY
- LINKAGES AND REFERRALS
- JUVENILE DELINQUENCY, FAMILY VIOLENCE, AND CRIME

Allegan County reported a need to support families with higher rates of developmental delays and lower rates of school readiness. In addition, many families face barriers to accessing important services like well child visits and dental care due to lack of transportation, access to culturally appropriate health care, and/or family limitations with motivational support and/or educational experience.

Many parents in the county have more than two Adverse Childhood Experiences (ACEs), and have language, transportation, cultural, and socio-economic barriers. This ultimately affects parents' social/emotional health, which in turn affects how they raise their children. Child maltreatment can lead to long-term mental, physical, and emotional complications for children. It is crucial to give parents opportunities to improve their home environment and provide them with the right tools to cope with their past experiences. Home visiting programs can help provide these opportunities.

When families are burdened by chronic stress, they have difficulty coping with daily life and making the necessary decisions and contacts to improve their situation, whether it be through counseling, resource assistance, or wellness visits. With help from home visiting programs, families can access resources and support services from community partners.

COMMUNITY CONDITIONS IMPACTING FAMILIES

HOMELESSNESS AMONG CHILDREN



% of children ages 0-4 who experienced homelessness during the school year

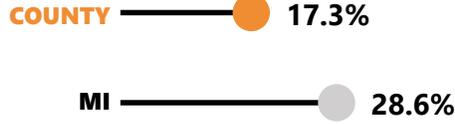


The county rate for homelessness is **lower** than Michigan's rate.

HOUSEHOLDS RECEIVING PUBLIC ASSISTANCE



% of households receiving supplemental security income or other public assistance



The county rate for receiving public assistance is **lower** than the rate in Michigan.

NO HIGH SCHOOL DIPLOMA



% of persons 16-19 years of age not enrolled in school with no high school diploma



The county rate of persons without a high school diploma is **higher** than Michigan.

NO HEALTH INSURANCE



% of persons without health insurance, under age 65 years

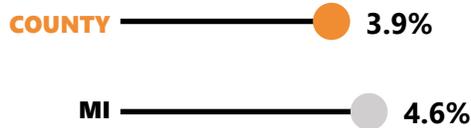


The county rate for no health insurance is **lower** than the rate in Michigan.

UNEMPLOYMENT



% of unemployed persons 16 years of age or older within the civilian labor force

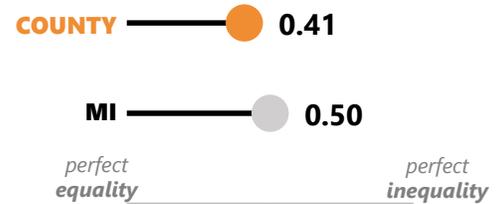


The county rate for unemployment is **lower** than the rate in Michigan.

INCOME INEQUALITY



A measurement of how far the wealth or income distribution differs from being equal (Gini Coefficient).

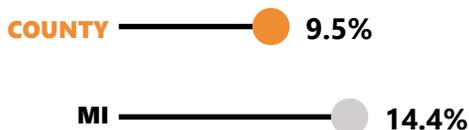


The county measure of income inequality is **lower** than in Michigan.

FAMILIES LIVING IN POVERTY



% population living below 100% of the federal poverty level

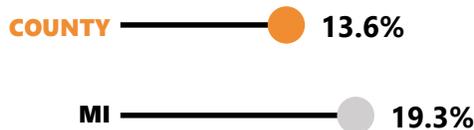


The county rate for poverty is **lower** than the poverty rate in Michigan.

CHILDREN EXPERIENCING POVERTY



% of children ages 0-17 who live below the poverty threshold

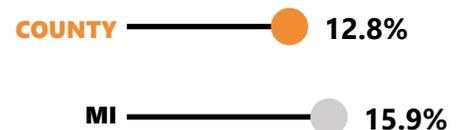


The county rate for children experiencing poverty is **lower** than Michigan's rate.

CHILDHOOD FOOD INSECURITY



% of children experiencing food insecurity (lack of access, at times, to enough food)



The county rate for childhood food insecurity is **lower** than Michigan's rate.

EXISTING HOME VISITING PROGRAMS

Home visiting programs sit at the intersection of families and communities. They provide critical linkages between families and community service systems. Allegan County identified the reach and quality of services for families that partner with home visiting and identified strengths and gaps in the service network. Some patterns of reach and quality for home visiting clients and the service delivery network were noted during the assessment, and ideas for strengthening the service delivery network are described below.

 **6**
HOME VISITING PROGRAMS



138 FAMILIES ARE ENROLLED IN HOME VISITING PROGRAMS IN ALLEGAN COUNTY



479 FAMILIES ARE IN NEED¹ OF HOME VISITING SERVICES IN ALLEGAN COUNTY

29%
OF FAMILIES IN NEED OF HOME VISITING SERVICES IN ALLEGAN COUNTY ARE RECEIVING HOME VISITING SERVICES



 **6** PROGRAMS ARE IMPLEMENTING AN EVIDENCE-BASED MODEL

 **1** IS OPERATING AT OR NEAR CAPACITY FOR MOST OF THE YEAR

Infants and children up to one year of age are well served by home visiting programs in the county. Prenatal mothers and children ages two to five are underserved. All geographic areas in the county are well covered by available home visiting programs, although specific groups have less options for programs.

CONNECTED SERVICES

Many home visiting programs are making connections and taking or making referrals to other agencies and organizations.



GAPS IN THE SERVICE NETWORK

- Mental health services
- Limited number of outreach agencies and organizations due to limited and reduced funding
- Lack of reliable transportation for families
- Limited availability of programs to support unmet needs of children
- Virtual visits not possible if families do not have reliable internet

MEETING NEEDS OF CLIENTS

Many organizations are meeting the needs of families, including home visiting programs that provide consistent and passionate services. There is strong collaboration among agencies within the Great Start Collaborative, which provides additional services to home visiting clients. Agency members can reach out to one another or they can use Help Me Grow Allegan's website or phone number to make referrals.

ALLEGAN COUNTY



QUALITY OF SERVICES PROVIDED

Both home visiting and other organizations are referring and connecting families to the necessary resources and services in the county. Most families feel services are high quality.

STRENGTHENING THE SERVICE DELIVERY NETWORK

The service delivery network needs to be strengthened by ensuring agencies are working with families of children ages 0-5 years old, are collaborating with one another, and are making the necessary referrals to one another's agencies. This prevents families from getting lost in the system and children's needs being neglected. Agencies can commit to working together by attending Great Start Collaborative meetings and connecting with each other regularly in the region.

¹Number of families likely to be eligible for MIECHV services based on the criteria: Number of families with children under the age of 6 living below 100% of the poverty line + number of families in poverty with a child under the age of 1 and no other children under the age of 6; AND belongs to one or more of the following at-risk sub-populations: Mothers with low education (high school diploma or less), young mothers under the age of 21, and/or families with an infant (child under the age of 1). Data Source: ACS 2017 1-Yr PUMS Data

COMMUNITY READINESS TO EXPAND HOME VISITING

New or expanded programs and services are most successful in communities that are clear about their readiness to provide a supportive context. Home Visiting partners were convened to discuss the five dimensions of readiness to expand home visiting and identified both community strengths and weaknesses. For each of these domains, the community partners scored each dimension as a 0 (no readiness), 1 (limited readiness), 2 (moderate readiness), 3 (significant readiness), or 4 (full readiness).

COMMUNITY KNOWLEDGE OF FAMILY NEEDS

FULL READINESS

4
3
2
1

Families and the community are surveyed routinely through committee meetings, home visits, and questionnaires to discover needs related to programming improvement. Providers are aware of the Great Start Collaborative's needs, and community partners advocate for programming, although some local partners still do not understand services being offered to families.

COMMUNITY PURSUIT OF EQUITY

MODERATE READINESS

4
3
2
1

The Great Start Collaborative and MACC help adapt programming and strategies to reach marginalized populations. Groups are working directly with families in migrant camps to provide them with services. The Great Start Collaborative hired a local bilingual community member as a home visitor and family coach. However, survey data suggests that services could work toward being more culturally appropriate.

COMMUNITY KNOWLEDGE OF HOME VISITING

LIMITED READINESS

4
3
2
1

Progress is being made on increasing visibility and knowledge of programs offered by strengthening partnerships with local agencies. However, the community knows very little about home visiting services in Allegan County.

COMMUNITY LEADERSHIP

LIMITED READINESS

4
3
2
1

Ascension Borgess Hospital in Allegan has a part-time OBGYN and a full-time pediatrician's office with two medical doctors. Interest is being gauged in offering virtual support groups and parenting classes. The county lacks a birthing hospital.

COMMUNITY CLIMATE

MODERATE READINESS

4
3
2
1

Some programs prioritize services for families with young children. These partners tend to prioritize physical and emotional health. Early childcare and education is not at the forefront of discussion in our community. Some community services are made available on-site at migrant housing locations.

COMMUNITY RESOURCES

FULL READINESS

4
3
2
1

Community Action of Allegan County and (2) GSC Family Coaches are paid employees, offering home visits using the Parents as Teachers curriculum and model. There is a gap in services for bilingual families and those who don't qualify for Head Start, Early On, and/or the Maternal Infant Health Program. More funding is needed, and there is a need for more community partners to refer families to home visiting.

NEED & CAPACITY TO EXPAND HOME VISITING

Allegan County has need and capacity to expand evidence-based home visiting. There are gaps in services available for many vulnerable groups, including families living within 101-250% of the Federal Poverty Level, families without qualifying developmental delays, families who are members of the Gun Lake Tribe, and families in migrant and refugee communities.

This process engaged families to participate as partners and leaders by conducting family surveys, using virtual and in-person home visits to collect information, and having phone calls with specific questions. The GSC believes family involvement is critical and included families at each point of the process. To reduce barriers and ensure parent and family participation, gas cards, food, childcare, were provided.

Thank you to the parents and community partners who engaged in the assessment process.

Data collected by the Allegan County Great Start Collaborative with assistance from MPHI-CHC. For more information about this assessment, contact the Allegan County Great Start Collaborative. This program is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$7,799,696 with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit HRSA.gov.