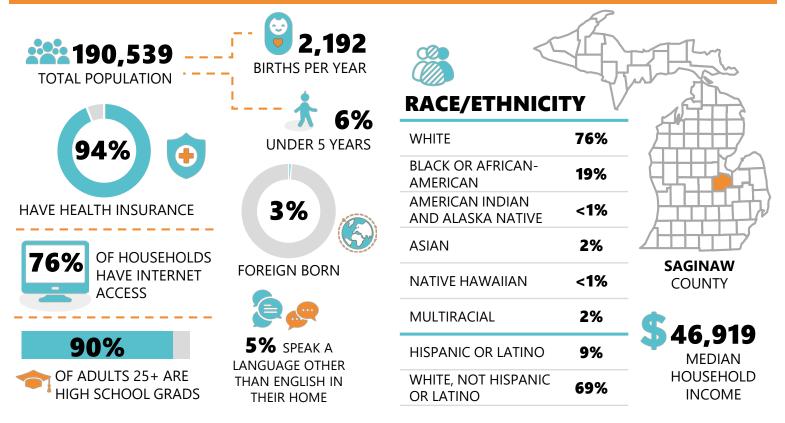
2020 HOME VISITING NEEDS ASSESSMENT SAGINAW COUNTY

KEY DEMOGRAPHICS & CULTURAL CHARACTERISTICS



OUTCOMES IMPACTED BY HOME VISITING

COUNTY PRIORITIES

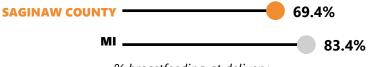
MATERNAL HEALTH

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



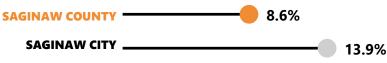
Child health is a concern in Saginaw County, more specifically, infant health.

Breastfeeding rates are significantly lower than the state average.



% breastfeeding at delivery

The infant mortality rate for the City of Saginaw is almost double that of the county.



infant mortality %

COMMUNITY CONDITIONS IMPACTING FAMILIES

HOMELESSNESS AMONG CHILDREN	HOUSEHOLDS RECEIVING PUBLIC ASSISTANCE	NO HIGH SCHOOL DIPLOMA
% of children ages 0-4 who experienced homelessness during the school year	% of households receiving supplemental security income or other public assistance	% of persons 16-19 years of age not enrolled in school with no high school diploma
COUNTY	COUNTY 37.0%	COUNTY 4.7%
MI — 4.6%	MI 28.6%	MI 3.2%
The county rate for homelessness is lower than Michigan's rate.	The county rate for receiving public assistance is higher than the rate in Michigan.	The county rate of persons without a high school diploma is higher than Michigan.
NO HEALTH INSURANCE	UNEMPLOYMENT	INCOME INEQUALITY
% of persons without health insurance, under age 65 years	% of unemployed persons 16 years of age or older within the civilian labor force	A measurement of how far the wealth or income distribution differs from being equal (Gini Coefficient).
COUNTY 6.1%	COUNTY 5.5%	COUNTY 0.47
MI 6.4%	мі ——— 4.6%	MI 0.50 perfect perfect equality inequality
The county rate for no health insurance is lower than the rate in Michigan.	The county rate for unemployment is higher than the rate in Michigan.	The county measure of income inequality is lower than in Michigan.
FAMILIES LIVING IN	CHILDREN	CHILDHOOD FOOD
POVERTY	EXPERIENCING POVERTY	INSECURITY
% population living below 100% of the federal poverty level	% of children ages 0-17 who live below the poverty threshold	% of children experiencing food insecurity (lack of access, at times, to enough food)
COUNTY	COUNTY 23.9%	COUNTY
MI 14.4%	мі ——— 19.3%	мі ———— 15.9%
The county rate for poverty is higher than the poverty rate in Michigan.	The county rate for children experiencing poverty is higher than Michigan's rate.	The county rate for childhood food insecurity is higher 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. Saginaw 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.

HOME VISITING PROGRAMS **639** FAMILIES ARE ENROLLED IN HOME VISITING PROGRAMS IN SAGINAW COUNTY

364 FAMILIES ARE **IN NEED**¹ OF HOME VISITING SERVICES IN SAGINAW COUNTY OF FAMILIES IN NEED OF HOME VISITING SERVICES IN SAGINAW COUNTY ARE RECEIVING HOME VISITING SERVICES

Home visiting programs in Saginaw County cover all geographic areas of the county. Children ages 5 to 6 years have limited programs available.

WELL CONNECTED SERVICES

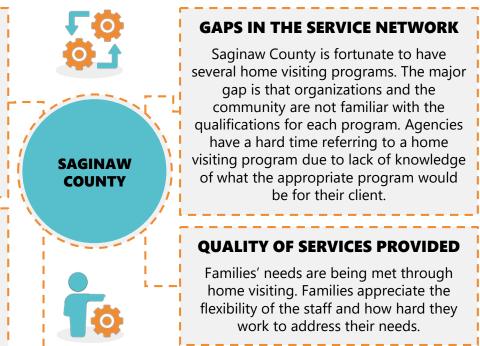
IMPLEMENTING AN

EVIDENCE-BASED MODEL

Services that are well connected in Saginaw County are: Kohls Safe Sleep, Judson Center, WIC, Community Mental Health, WorkFirst, Head Start, DHHS, Birth-5, Project Home, Saginaw Youth Protection, Healthy Families America, Early On, CPS, MIHP, 211, Community HUB, and CMU Health.

MEETING NEEDS OF CLIENTS

Saginaw County does a good job of meeting the needs of those that are enrolled in a home visiting program. If a program cannot meet the needs, they will refer them to someone who can. Saginaw hosts a monthly home visiting meeting to ensure all programs are working together and sharing information. Saginaw has had home visiting programs available for over 20 years so there are several agencies that are very familiar with these long running programs.



STRENGTHENING THE SERVICE DELIVERY NETWORK

Parents and families desire more home visits, postpartum visits for moms, and additional play groups with variety of days and times. There are many families that could benefit from home visiting, but staff have trouble engaging them. Additional funding is needed to provide additional home visits.

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

FAMILY PERSPECTIVES ON HOME VISITING

Saginaw County asked parents who have previously participated in a Home Visiting program in their county to take part in a focus group to share their experiences with home visiting and other community services. Focus group participants were asked to describe the risks and opportunities families face in their communities; the outcomes they're concerned about and what facilitates wellbeing; strengths and opportunities to improve home visiting programs; and strengths and opportunities to improve the service delivery system. Saginaw County completed 1 focus group with a total of 12 participants, 8 of which were served by home visiting programs in their community.



STRENGTHS

Parents who participated in the focus group identified many strengths of home visiting, including:

- Flexibility and responsiveness of home visitors;
- Knowledge of services and resources within the community;
- Close and connected relationships between home visitors and families; and
- Education provided to both children and parents.

1 OPPORTUNITIES TO IMPROVE

Parents who participated in the focus group identified opportunities to improve home visiting as well. Parents indicated that they:

- Wish they could get more home visits;
- Wish there was more focus on moms postpartum;
- Would like more availability for play groups, especially in rural areas;
- Had a lot of technology issues at the start of COVID with virtual visits; and
- Were interested in paper handouts being distributed electronically.

OUTCOMES OF HOME VISITING

- When asked "what are the outcomes you feel home visiting programs should work towards in your community?" parents who participated in the focus group stated they think parents should be built into networks and connected with other parents/families based on similar needs and children's age.
- When asked "what are the outcomes you wish to achieve with your **family** by participating in home visiting?" parents who participated in the focus group stated they want to improve their children's readiness for school and address any developmental delays.

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

SIGNIFICANT READINESS

Saginaw County's agencies work together and refer clients to resources available in the community. Each home visiting program does a risk assessment to help identify needs of the family and children. Saginaw County has many home visiting programs and partners are unsure of which program to refer clients.

COMMUNITY KNOWLEDGE OF HOME VISITING

SIGNIFICANT READINESS

Some of the home visiting services in Saginaw have been around for 20+ years which has helped them build strong relationships. The Great Start Collaborative shares information and informs other organizations about home visiting. Since home visiting has been around for so long, many have heard of the programs but may not know the specifics or the qualifications for each program.

COMMUNITY CLIMATE

SIGNIFICANT READINESS

3	
2	
1	
	3 2 1

Overall, Saginaw County supports home visiting services very well. Home visiting is a priority area of the Great Start Collaborative strategic plan. Programs would like to work on broadening referral sources.

COMMUNITY PURSUIT OF EQUITY

SIGNIFICANT READINESS

The home visiting staff feel they do represent their service population well. Many, if not all, live in the communities they serve. They also work with parents to encourage them to apply for open positions within their agencies. Parents with home visiting experience make the best advocates. A challenge is connecting those in rural areas to services.

COMMUNITY LEADERSHIP

SIGNIFICANT READINESS

The Great Start Collaborative hosts monthly meetings
and events to invite local business and chamber
leaders to give updates regarding home visiting and
other news. Since social service leaders are part of the
Collaborative, they are very well educated on home
visiting programs. However, not many leaders attend,
and periodic attendance might not be enough to fully
understand the home visiting landscape.

COMMUNITY RESOURCES

SIGNIFICANT READINESS

The community has great networks and resources to help parents and families. Home visiting staff struggle with connecting families to housing resources.

NEED & CAPACITY TO EXPAND HOME VISITING

Saginaw County has both the need and capacity to expand evidence-based home visiting. Saginaw County has several home visiting programs but there are still many families that are eligible for home visiting that are not enrolled in services.

This process engaged families to participate as partners and leaders by inviting families to participate with an active role and with active support. The family engagement connections that are already existent within Region 5 were utilized. A survey was administered to agencies to distribute to the clientele they serve who fit the criteria of this needs assessment. Adjustments were made to data collection to account for geographical separation as well as ongoing COVID-19 restrictions. Incentives were provided to families that participated.

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

Data collected by Region 5 Perinatal Quality Collaborative with assistance from MPHI-CHC. For more information about this assessment, contact Region 5 Perinatal Quality 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.