

**LOCATION 1 – (Opening montage during voice over. A neighborhood. A home visitor walking up to a house and being let in. Scenes from the home visitors' visits.)**

**LOUISE - HOME VISITOR (VO)**

All over the country home visitors are working with families who are expecting, or have young children. Home visitors help parents or guardians promote happier, healthier parenting, prevent child abuse, and improve health. They also help parents prepare their little ones for school, and take steps towards getting job skills or employment.

**LOUISE - HOME VISITOR (VO)**

Policymakers and program operators have invested in home visiting programs like mine, because there is evidence that they work. But there are still some questions about what works best with whom. So, in 2010, more money was added to expand home visiting services and improve our knowledge about how they are helping families across the country.

Thus, the Mother and Infant Home Visiting Program Evaluation (or MIHOPE) was created.

**LOCATION 2 – Afternoon (in the office break room)**

**ANNA (REFERRAL PARTNER #1)**

Hey Betty, how are you doing today?

**BETTY (REFERRAL PARTNER #2)**

Good. I ran into the two moms that I referred to home visiting last week and they're doing great.

How are you doing?

**ANNA**

I'm swamped. There's not enough hours in the day. And, today, when I was referring a family to home visiting services I heard about something called MIHOPE. What's that about?

**BETTY**

It's a big national evaluation of home visiting. It's a pretty big deal.

*[Anna gives Betty a skeptical look]*

I think it's pretty great that our community is a part of it.

**ANNA**

You clearly have been in different meetings than me! I heard it was more paper work *and* will reduce the number of families who get home visiting services.

**BETTY**

Well, actually the programs that are participating in the study got *more* money for *more* services. The hard part is that they need to recruit more eligible families...That's where we come in.

**ANNA**

How does that work?

**BETTY**

Well, the more families we refer the better. Home visiting will serve as many families as they have capacity for, just like always... and there's are more program slots than before. But they also need to *offer* services to more families and help them enroll in the study.

**ANNA**

How do they pick who gets in the program? Do you know how many eligible families I have? That doesn't sound fair.

**BETTY**

Yeah, I know –there are a lot of eligible families in our community. To be fair, for the study, the home visiting program is choosing who to serve randomly, like tossing a coin. Everyone that is eligible has an equal chance of getting services.

**ANNA (looking skeptical)**

Hmmm... that doesn't feel right. What if the family really needs home visiting?

**BETTY**

Well, even now when we make a referral we can't guarantee the family will get home visiting, right?

**ANNA**

Right...

**BETTY**

Well the study will provide really important information about how home visiting programs operates in different parts of the country and about how it effects families.

[Anna looks concerned]

Look, you said it yourself, there is so much need and not enough resources to go around. That's why this study is so important. And with MIHOPE we can be clear that everyone who needs services has an equal chance of getting them.

**ANNA**

What happens to the people that don't get home visiting?

**BETTY**

They'll receive information about other services in the neighborhood. Plus, people who participate in the study get small payments and gifts for their kids.

**ANNA**

Are the program services changing?

**BETTY**

Nope

**ANNA**

Are the eligibility requirements changing?

**BETTY**

No, but not everyone who is eligible for home visiting is eligible for the study. The moms have to be 15 or older and pregnant or have a baby under 6 months.

**ANNA**

How much time will it take?

**BETTY**

Not too much. They'll be asked to take part in two phone interviews, share some contact info, and give permission for MIHOPE to access information on the programs they use, like Medicaid. MIHOPE will ask some participants for permission to video tape two home visits. They don't have to do it if they don't want to and everything will be very private -- only researchers will have access to the information.

**ANNA**

So let me understand this... they want us to continue referring pregnant women or new moms and for the most part, what we do is not changing. Okay.... But, is this about the families or about the study?

**BETTY**

Once we know more about how home visiting works across the country, then policymakers and people like you and me will know how to better provide services to children and families that need them.

**ANNA**

So we have to look at the big picture.

**BETTY**

Exactly, I think in the long run it's the right thing to do. And like I said, it is pretty cool that our community is having a chance to inform national policy!

**ANNA**

That is pretty cool. How long does it run?

**BETTY**

They are starting soon, along with other programs in the country. It will take about a year and half. That's nothing if you think about how long we want these kinds of services to last.

**ANNA**

I feel like that makes sense. This is about getting more information to help people.

**BETTY**

You got it...

**EPILOGUE**

**LOUISE - HOME VISITOR**

As a stakeholder and partner of home visiting programs, we wanted to inform you about our program changes and MIHOPE.

Thank you for all the hard work and support you give to home visiting. Please continue your great work by referring families to home visiting.

We hope we have addressed some of your questions about the study and that you are as excited as we are to expand home visiting services to more families and explore how to improve services.

**FADE OUT**

**TEXT ON SCREEN**

**Authorization:** The Patient Protection and Affordable Care Act of 2010

MIHOPE is closely integrated with another study called MIHOPE-Strong Start, which is examining birth outcomes for women who are enrolled in Medicaid.

The MIHOPE and MIHOPE-Strong Start teams are led by MDRC in collaboration with Columbia University, James Bell Associates, Johns Hopkins University, Mathematica Policy Research, New York University, and the University of Georgia, under contract to U.S. Department of Health and Human Services.

Study enrollment and data collection will begin in 2012. Initial findings will be published in four annual reports starting in 2014.

The views expressed in this video do not necessarily reflect the views or policies of the U.S. Department of Health and Human Services.