

## Montana Uses a Public Health Home Visiting Program to Decrease Infant Mortality Risk Factors

Montana Department of Public Health and Human Services

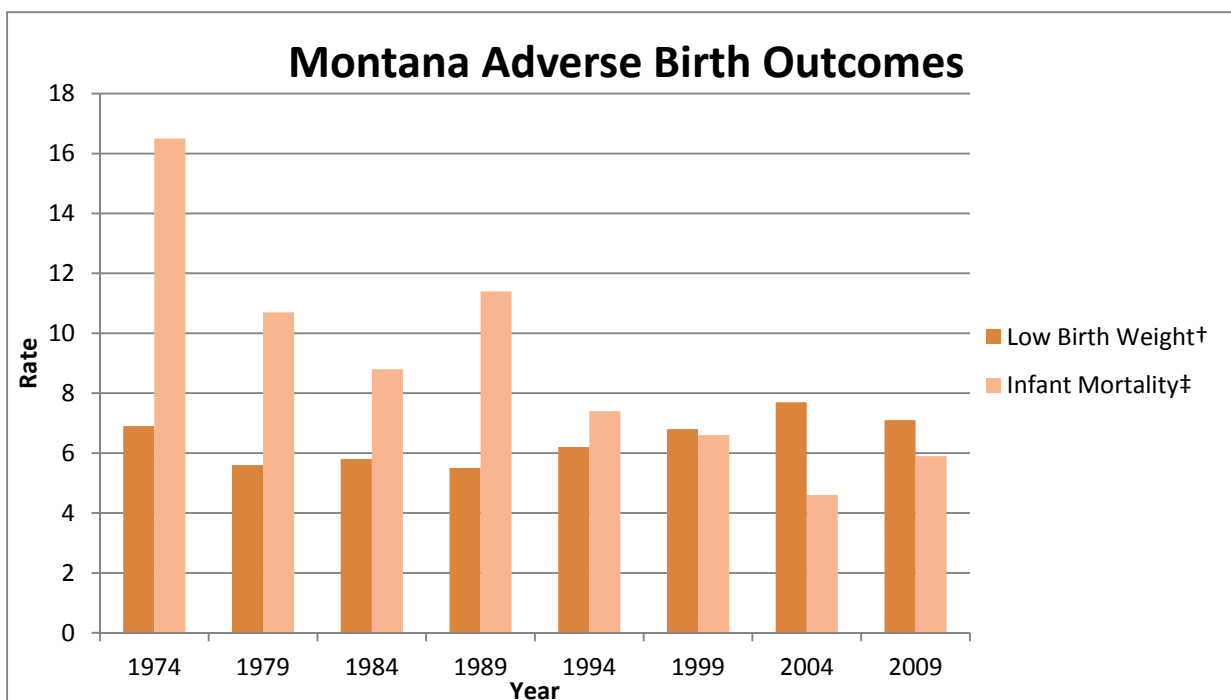
### Overview

The Montana Initiative for the Abatement of Mortality in Infants (MIAMI) Act was passed in 1989. The act's goals are to improve pregnancy outcomes, such as low birth weight, and lower Montana's infant mortality rate. As part of the MIAMI Act, high-risk pregnancies are identified and prenatal care is encouraged. Services in addition to prenatal care are often needed by the pregnant women served.

In 2009, the infant mortality rate in Montana was 5.9 per 1,000 live births, a figure lower than the overall U.S. infant mortality rate of 6.2 per 1,000 live births during the same year.<sup>1,2</sup> Low birth weight, on the other hand, appears to be an issue in the state of Montana, with a higher rate of low birth weight infants than the national average.<sup>2</sup> Although the rate declined significantly in the latter half of the 1970s, it has been on the rise since then, with the current rate of low birth weight infants similar to the rate recorded in 1974. In 2009, 7.1% of Montana live births were of low birth weight.<sup>1</sup> Figure 1 illustrates how Montana's infant mortality rates have decreased over time while low birth weight rates have increased.

Montana's Public Health Home Visiting (PHHV) program was introduced as a component of the MIAMI Act.<sup>3,4</sup> Home visiting provides women with risks during pregnancy and/or infants with risks to be matched with services. In addition, health professionals who conduct the home visits are able to monitor the health of clients in their own home environment, thus tailoring services and care to their specific needs.

**Figure 1: Low Birth Weight and Infant Mortality Rates per 1,000 Live Births in Montana, 1974-2009;**  
Montana Office of Vital Statistics Analysis Unit



### Strategy Overview

To improve birth outcomes, Montana has developed a home visiting program to monitor and assist high-risk pregnancies through one year postpartum. Since July 2010, 14 local health departments and one tribal health department in Montana provided PHHV services. The goal is to improve birth outcomes by providing applicable education and services within the home environment.

### Target Population

Those who are given highest priority are:

- Low-income women at risk for poor pregnancy outcome
- Infants at risk for poor outcomes

### Methods

Participant women are to receive three prenatal and one postpartum home visit. Infants are to receive four visits before one year of age. Home visits are done by registered nurses, social workers and registered dietitians. Services include screening for domestic abuse, substance use, smoking, and assessment of need for referrals. Infants are screened for developmental milestones at 8 and 10 months using the Ages and Stages and the Ages and Stages: Social Emotional questionnaires. Home visitors refer frequently to programs addressing housing, mental health, nutrition and financial assistance when appropriate, and educate about and facilitate breastfeeding, infant care, and parenting.

### Conclusion

Home visitors utilize a common data collection instrument to gather demographic, risk factor, and referral information about each client served. See the box on this page for highlights from the data reported.<sup>5</sup>

### Data from the Public Health Home Visiting Programs in Montana

1. In State Fiscal Year 2010, 753 women and 700 infants were enrolled in the state's 15 PHHV programs.
2. In State Fiscal Year 2011, 1142 women and 1059 infants were enrolled in the state's 15 PHHV programs.
3. Women receiving visits during State Fiscal Year 2010 and 2011 were most often referred to the following services:
  - Smoking cessation
  - Mental health/support
  - Housing assistance
  - WIC and other food assistance
  - Medicaid

### References

1. Montana Department of Public Health and Human Services. Montana Vital Statistics data provided 15 October 2012 by the Vital Statistics Analysis Unit, Montana DPHHS.
2. Kochanek KD, Xu JQ, Murphy SL, Miniño AM, Kung H. Deaths: Final Data for 2009. *National Vital Statistics Reports*; volume 60, number 3. Hyattsville, MD: National Center for Health Statistics. 2011.
3. Montana Department of Public Health and Human Services. "Public Health Home Visiting SFY 2006 Report." Available at: <http://www.dphhs.mt.gov/publichealth/homevisiting/documents/2009StateofMontanaLegReportwithreferences309final.doc>. Accessed 09-10-2012.
4. MIAMI Project. "Montana Code Annotated 2011." Available at: <http://data.opi.mt.gov/bills/mca/50/19/50-19-311.htm>. Accessed 09-10-2012.
5. Montana Department of Public Health and Human Services, unpublished data submitted from 15 PHHV sites for state fiscal years 2010-2011.