

# HOME VISITING IS A HEALTH INTERVENTION THAT IMPROVES WCV COMPLIANCE

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## SOUTH CAROLINA FIRST STEPS

South Carolina First Steps is the state's only dedicated, comprehensive early childhood initiative focused on getting children ready for school and life success. We partner with families, early educators, and communities statewide to support the success of children from birth through age five. Between 2017-2021, First Steps Local Partnerships implemented 8 different home visiting programs.



## INTRODUCTION

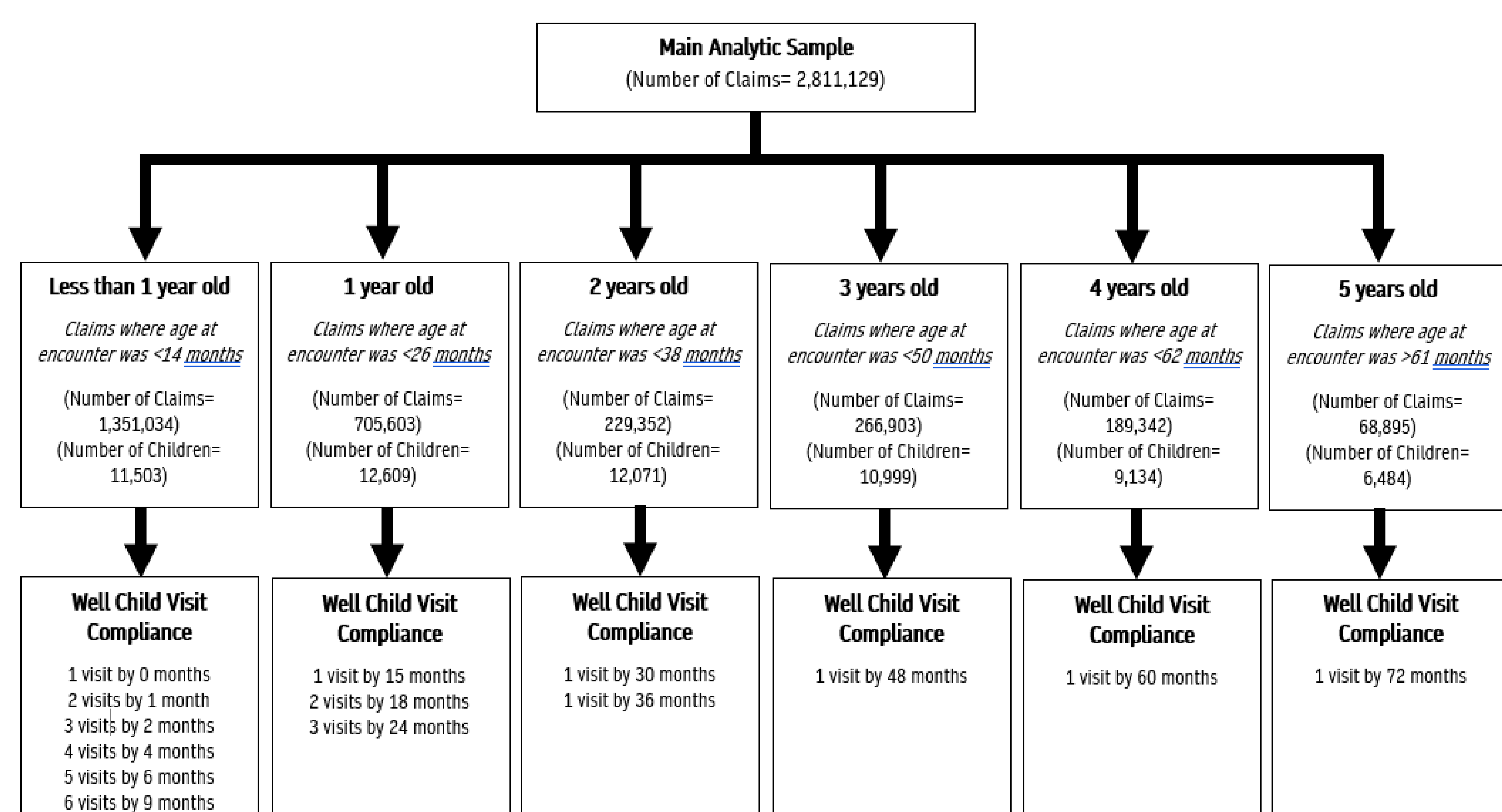
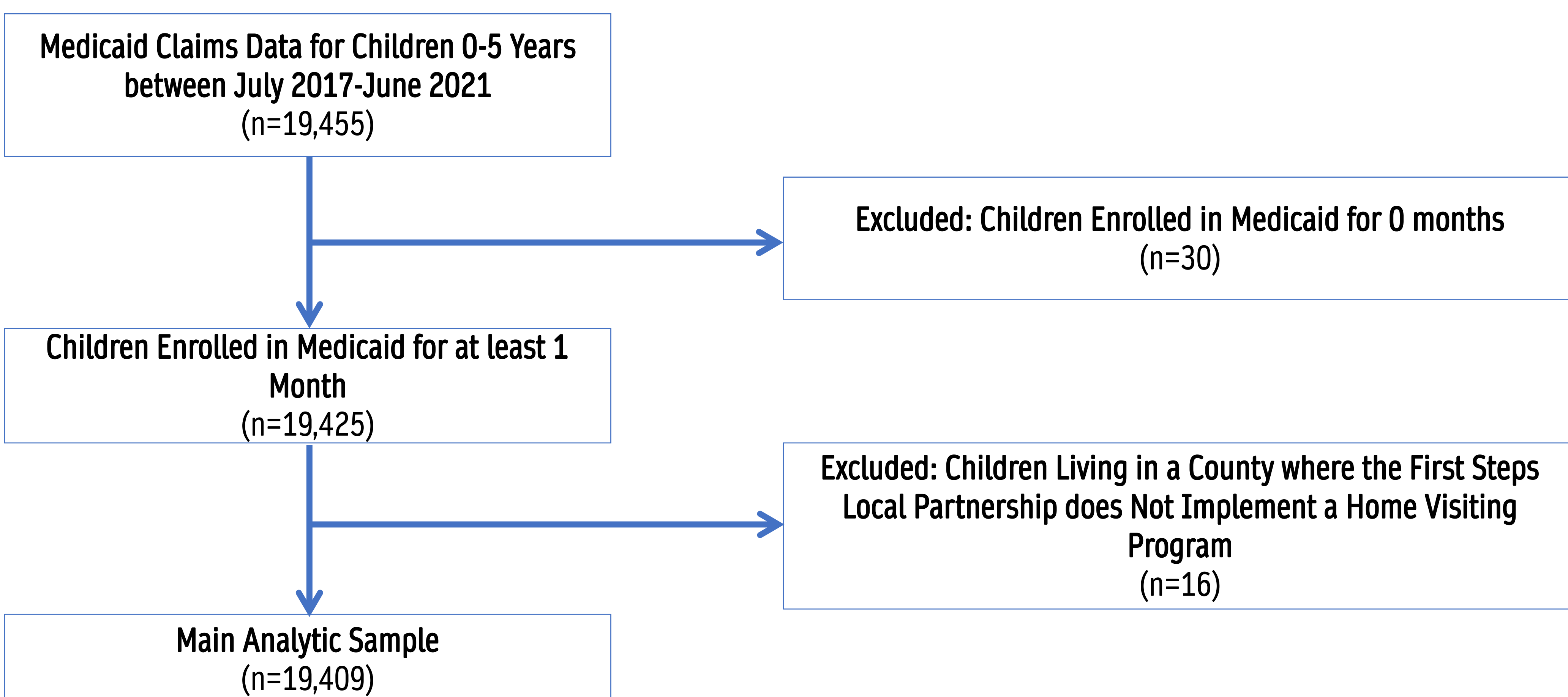
- Home visiting (HV) programs are an important tool to improve the physical and social-emotional health of young children who are at risk for poor health and educational outcomes.<sup>1</sup>
- Participation in an HV program is associated with a higher likelihood of meeting well-child visit recommendations.<sup>2</sup>
- Well-child visits are important because during these visits, children receive routine vaccinations and pediatricians are able evaluate whether they are meeting developmental milestones.<sup>3</sup>

## RESEARCH QUESTIONS

- Are children enrolled in First Steps HV programs more likely to meet WCV recommendations?
- Are children enrolled in First Steps HV programs receiving a higher number of WCV visits?

## METHODS

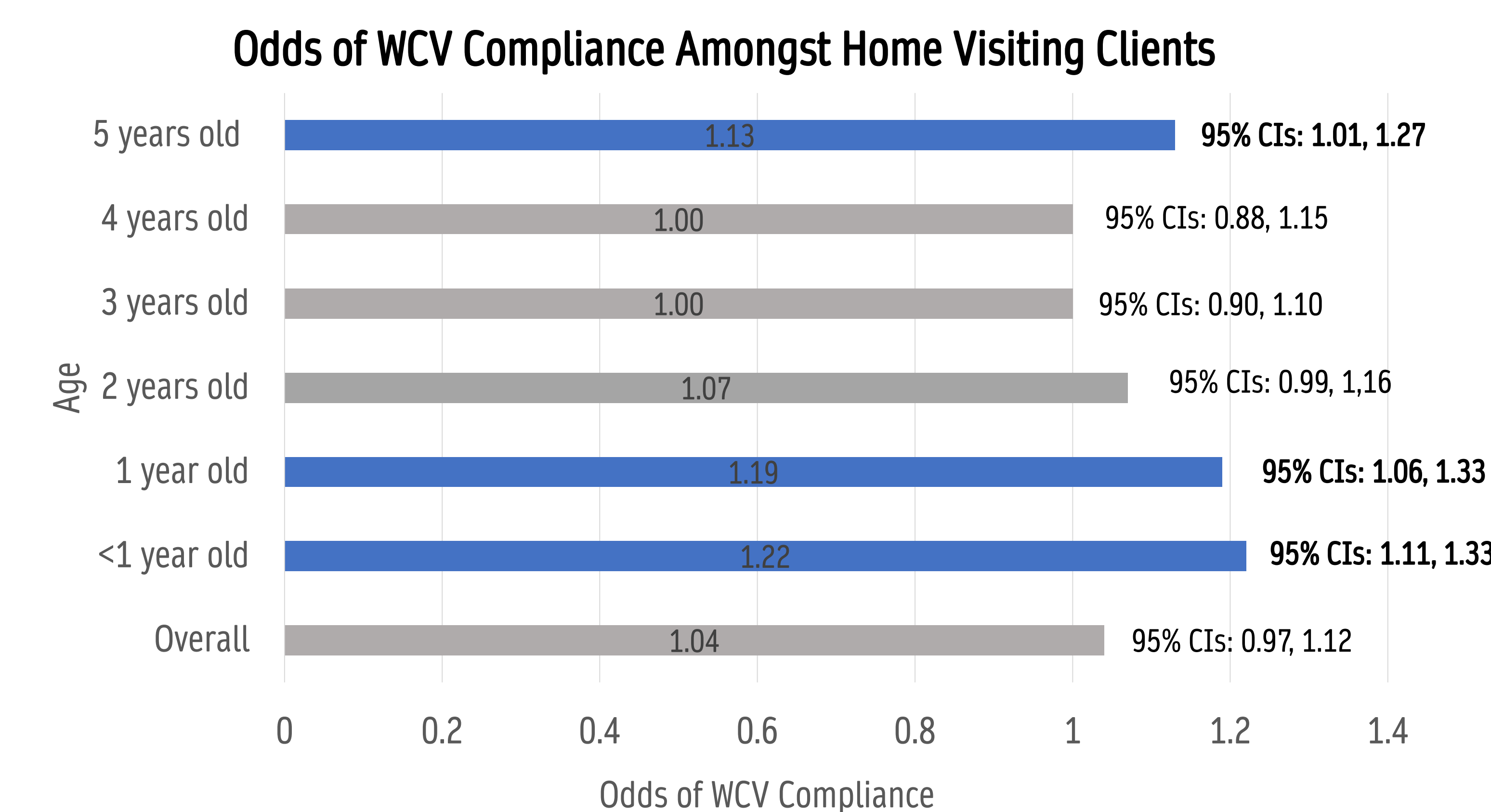
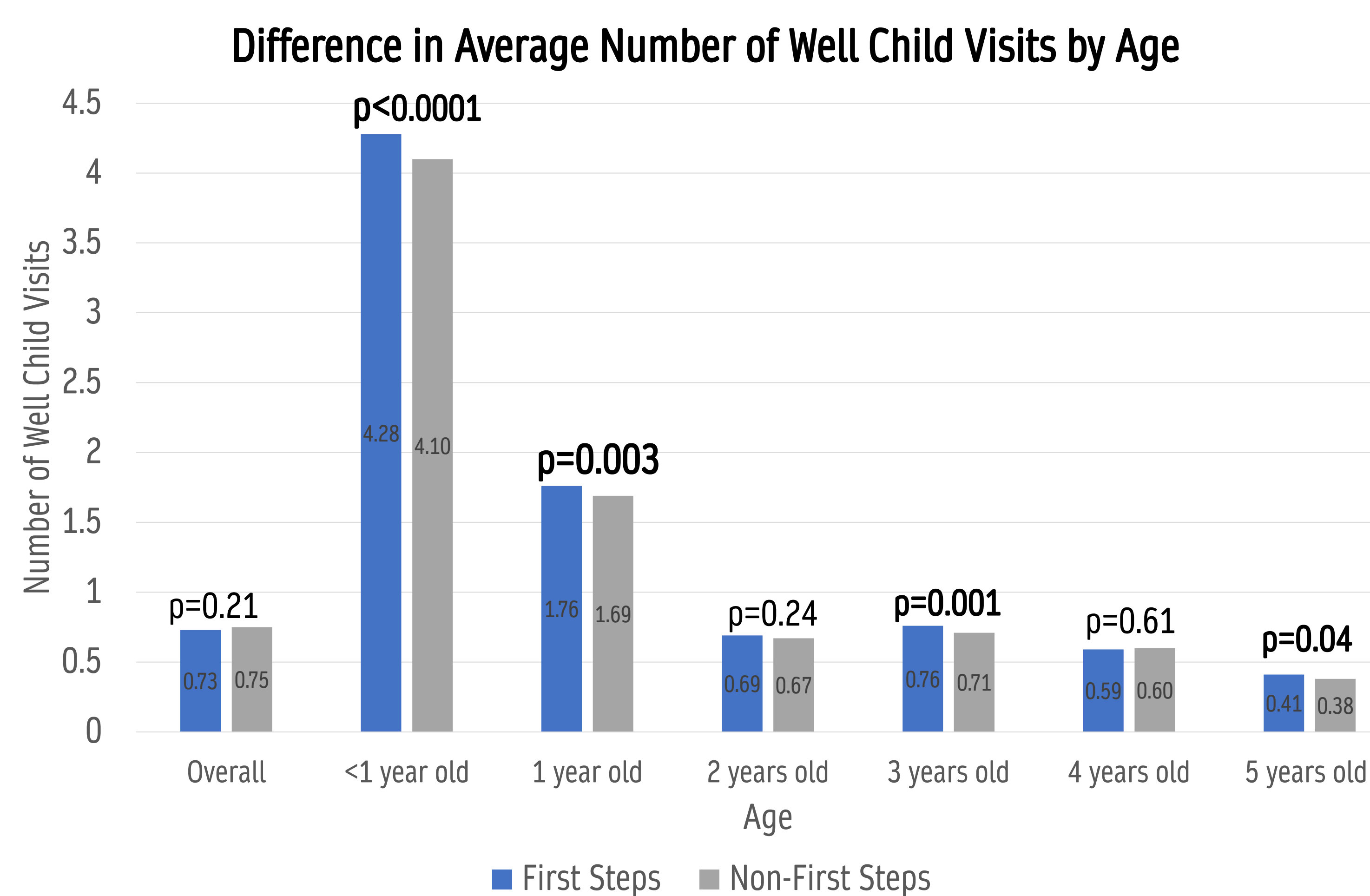
- Children in First Steps HV programs were propensity-score matched with unenrolled children based on age in months at time of enrollment in Medicaid, location (county), sex, and months enrolled in Medicaid
- Medicaid Claims data was analyzed using SAS 9.4 to evaluate differences in well-child visits for enrolled and unenrolled children
- T-tests, linear regression, and logistic regression were used to compare healthcare utilization between groups.



## RESULTS

### Sample Characteristics

| Characteristic   | Overall        | HV Participants | Non-HV Participants |
|--|----------------|-----------------|---------------------|
| Total Number of Children (N, %)                              | 19,409 (100.0) | 5,044 (26.0)    | 14,365 (74.0)       |
| Median Age at Medicaid Enrollment (Months)                   | 3.0            | 4.0             | 3.0                 |
| Median Months Enrolled in Medicaid (Months)                  | 51.0           | 49.0            | 52.0                |
| Male (%)   | 51.7           | 52.3            | 51.5                |
| Female (%)   | 48.3           | 47.7            | 48.5                |
| African American (%)   | 16.7           | 21.1            | 15.1                |
| White/Caucasian (%)  | 10.6           | 15.6            | 12.1                |
| Other Race/Ethnicity (%)                                     | 4.2            | 4.8             | 4.0                 |
| Missing Race/Ethnicity (%)                                   | 69.5           | 67.7            | 68.8                |
| Living in a Metro County (%)                                 | 63.7           | 63.4            | 63.8                |
| Living in a Non-Metro County (%)                             | 36.3           | 36.6            | 36.2                |
| Living in a County with a Lower SDI (%)                      | 50.8           | 51.3            | 50.6                |
| Living in a County with a Higher SDI (%)                     | 49.2           | 48.7            | 49.4                |
| Living in a County with a Lower Number of Pediatricians (%)  | 52.3           | 53.1            | 52.0                |
| Living in a County with a Higher Number of Pediatricians (%) | 47.7           | 46.9            | 48.0                |



## KEY TAKEAWAYS

Enrolled children in certain age groups have a higher average number of WCV than non-enrolled children.

Clinically, these differences are relatively small; there is less than a 1 visit per year difference between groups.

## KEY TAKEAWAYS

Enrolled children in certain age groups have greater odds of WCV compliance than non-enrolled children.

WCV compliance is more common in younger children, although there is an exception for five-year-olds.

## DISCUSSION AND CONCLUSIONS

- While well-child visit compliance is important, this measure only captures children that are "perfect", and in practice, there is a big difference between receiving 1 well child visit and receiving 4 or 5 well-child visits, so the differences in the total number are important to consider
- Increasing both the total number of well-child visits and well-child visit compliance is important when trying to improve health and educational outcomes
- This study shows that all evidence-based HV programs have a positive impact on WCV for some age groups; this allows communities to choose a HV program that best fits their needs and resources, rather than focusing on a single outcome.

## CONSIDERATIONS

- Due to the nature of First Steps' work, the organization is serving extremely at-risk children who may be very different from non-enrolled children
- Data is only available at the county level, so it was unable to be determined which social determinants may be contributing to healthcare utilization at the community level
- Children who are not enrolled in a First Steps home visiting program may be enrolled in another home visiting or parenting program that is implemented by another organization



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