

WRITTEN STATEMENT OF  
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THE NAVAJO NATION, *GROWING IN BEAUTY* HOME VISITING PROGRAM  
BEFORE THE  
HOUSE COMMITTEE ON WAYS & MEANS  
SUBCOMMITTEE ON WORKER & FAMILY SUPPORT  
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Good afternoon Chairman LaHood, Ranking Member Davis, and members of the Subcommittee. I bring you greetings on behalf of the Navajo Nation and appreciation for the invitation to join this panel and this hearing. It is an honor to testify on behalf of our families about the impact of Maternal, Infant, and Early Childhood Home Visiting (MIECHV) funding and the importance of Tribal MIECHV funds to the Navajo Nation.

I am a Diné (Navajo) woman from the Kinłhichíinii (Red House) clan; I'm born for To' Aheedłíinii (Waters Flowing Together), and my paternal and maternal grandfathers are Áshjįhi (Salt) and Honágháahnii (One Walks Around). I live and work in Window Rock, AZ. '*Hozhóógo Jinóóseel*' (*Growing in Beauty*) is the Navajo Nation's Tribal MIECHV program.

The Navajo Nation (Diné Bikéyah), with a population of roughly 170,000 Indigenous individuals, spans 27,425 square miles spread across Arizona, New Mexico, and Utah.<sup>1</sup> Like all great nations, we work to ensure that our children grow into healthy individuals within thriving communities. I have worked as a provider, program director, and champion for early childhood system development via home visiting for 20 years. I have the privilege of supporting the Navajo Nation in the development of its home visiting services to strengthen positive maternal and child health and mental health, child development and learning outcomes for Native American families, living with historical trauma, and with more than a third (35.2%) living below the poverty line; including 45% of nearly 40,000 children under age 18.<sup>2</sup>

The Navajo Nation has applied for and received funding under the Tribal MIECHV funding in the 2016 five-year competitive grant cycle and again in the 2024 cycle. The MIECHV Program aims to:

- Improve the overall health of mothers and children;
- Get children ready to succeed in school;
- Improve families' economic well-being; and

- Connect families to other resources in their community (for example WIC, Medicaid, employment and educational resources, housing support, parenting support classes, and resources for food insecurity).

The Program works to prevent:

- Child injuries, abuse, and neglect; and
- Crime and domestic violence.<sup>3</sup>

The Tribal MIECHV Program as implemented on the Navajo Nation supports services delivered in hard-to-reach, parts of New Mexico, Arizona, and Utah; areas so remote they many have unpaved roads. Of the approximately 10,700 miles of roadway owned by the BIA and the Navajo Nation, roughly 85% are unpaved dirt roads and 15% are paved roads.<sup>4</sup> In these often challenging settings, we work with families to promote happy, healthy children and parents through positive relationships and in-home education. As Navajos (Diné), we believe that children are a gift and a blessing, and families are their child’s first teacher supporting positive growth and development of each child. Through our services we hope to grow strong communities for the next generation.

The Navajo Nation Tribal MIECHV Program, titled *Growing in Beauty*, is built around the evidence-based Parents as Teacher (PAT) program model.<sup>5-7</sup>

A key feature of the PAT model involves home visits by trained staff to plan and implement services.<sup>5</sup> In addition to giving visiting staff “... a holistic view of each child and family, which can help the visitors tailor services to meet family needs. Home visits also can accommodate families' schedules, encouraging the participation of families that might be unable to attend programs with more structured and less individualized schedules.”<sup>5, p. 91</sup>

Home visiting as primary prevention is essential to the health and well-being of the Navajo Nation. With the support of Tribal MIECHV funds, the *Growing in Beauty* program has served a total of 106 unduplicated families and 159 unduplicated enrolled children living in hard-to-reach rural areas. Many families have more than one child enrolled in home visiting services at one time. Our staff of 3 home visitors drive hundreds of miles per week to visit families and provide them with early childhood education, activities, and support. In fiscal year 2025, our home visitors conducted 282 in-person home visits and, when needed, 46 virtual visits, totaling 328 visits.

The services that we provide to underserved tribal members include, but are not limited to:

- Assign a ‘home visitor’ with training and culturally based knowledge necessary to guide the family in accessing services appropriate to identified needs.
- Assess, through in-home visits, the basic health, educational, and social support needs of individuals in the home and the family as a unit;
- Design tailored service plans intended to address individual and family health and related needs;
- Establish connections to sources of support for building culturally-relevant experiences intended to strengthen health and related behaviors in a manner consistent with traditional Navajo belief systems, including “*Hózhó*, an actively integrated, experiential and transformative Diné wellness philosophy foundational to the formation of a strong ... cultural identity”.<sup>8, p. 256</sup>; *Ké*, “connectedness to family, clan, tribe, community ...[as]

a central theme, requiring a constant awareness of the relationships and interconnectedness between one and the environment (others, family, community, tribe, spirits, people of the world, all living creatures, nature, and the universe).<sup>9, p. 25</sup>

- Identify resource options for addressing specific needs of individual family members and the family as a unit;
- Link qualified and culturally appropriate service providers who can address individual and family health and related needs;
- Specify financial support options and other sources of support that families can access to address specific needs;
- Conduct, on a periodic basis, assessment of progress in implementing the service plan involving primary input from families being served as well the from the home visitor and selected consultants with expertise in health, psychology, social services, childhood learning, family dynamics—and not least of all Diné culture—as needed.
- Redesign and/or realign the service plan as needed to more fully address needs and improve outcomes for individuals and families based on assessment results and agreed upon strategies for improving outcomes.
- Report results of the home visiting program in terms of measurable results reported using both quantitative (e.g., numbers of persons served, scaled numerical ratings of service quality) and qualitative (e.g., service recipients' descriptors of service quality) outcome measures.

*Growing in Beauty* aims to support families like the Begays, a typical Navajo family that requested home visiting services in 2025. The Begay (a placeholder name used to protect confidentiality) family has three children: a 4-year-old, a 3-year-old, and 1-year old. Upon enrollment in the *Growing in Beauty* program, Mrs. Begay expressed significant concerns about her toddlers' frequent tantrums and noticeable speech delays. Additionally, she felt understandably overwhelmed balancing the demands of a newborn while coping with the developmental needs of the other two children. The Begay parents worked closely with their home visitor to establish a structured daily routine designed to integrate engaging, developmentally appropriate learning activities. Despite the inherent challenges (e.g., limited income, often unreliable transportation options, spotty digital/online service options), the parents remained deeply committed. They successfully leveraged their natural home environment and actively engaged extended family members to weave the strength and wisdom of traditional Navajo teachings into their children's daily routine.

Over approximately six months of consistent effort and support, Mrs. Begay began to notice significant improvements and progress. The children were experiencing fewer tantrums. They were more cooperative and showed eagerness to help with daily chores. Mrs. Begay shared that having a consistent routine and activities each day made a positive difference for the entire family. Both toddlers are now able to count in the Navajo language and can identify several animals in Navajo. They have also developed stronger fine motor skills through cutting, pasting and drawing activities. The children are beginning to speak in complete sentences, and they enjoy singing songs and participating in rhyming activities. They continue to show growth in their language and communication skills.

When another family, the Yazzies (again a placeholder name used to protect confidentiality), enrolled in the *Growing in Beauty* Home Visiting Program, their young son was experiencing

behavioral and communication challenges, and the family also lacked a structured routine at home. Through consistent guidance, tailored support, and targeted social-emotional development activities, the parents gained a deeper understanding of their son's developmental milestones. The home visitor equipped the parents with effective strategies for positive redirection and enhanced communication, allowing them to foster a more stable and nurturing home environment.

Since successfully graduating from the program, the child has transitioned into kindergarten and continues to thrive academically. Mrs. Yazzie reports that her son is excelling in school, with strengths in reading and math. His teacher has also noted that he is performing well ahead of his age level, demonstrating advanced comprehension and a strong grasp of the curriculum.

Mrs. Yazzie expressed sincere gratitude for the program's impact, noting that it helped her realize how everyday interactions can be transformed into valuable teaching opportunities. She credits the program with significantly building her confidence as a parent and providing her with the tools necessary to support her son's ongoing growth.

Inspired by her own positive experience, Mrs. Yazzie encouraged her expectant daughter to enroll in the *Growing in Beauty* Home Visiting Program. Following the birth of her baby, the daughter and her child remain actively engaged in the program, continuing to benefit from its comprehensive services.

The “Begay” and “Yazzie” family journeys beautifully exemplify the lasting, multigenerational impact of early intervention. By empowering parents and fostering strong family engagement, the program lays a foundation for lifelong academic and personal success.

Our Navajo Nation has a proud history and culture that supports the strength and resilience of its people. Yet our families struggle with the weight of historical trauma, poverty, and long-lasting, generational burdens. Representative statistics pulled from a variety of sources highlight the critical need for home visiting services, which help to secure the health and well-being of the Diné people:

- Our Tribal land is designated as a Medically Underserved area,<sup>10</sup> and our people’s life expectancy is 5.5 years shorter than the US average.
- Our infant mortality rates are consistently higher (e.g., in 2018, 10.3 per 1,000 for Navajo Nation versus 5.6 per thousand for Arizona and the target 6.0 identified in *Healthy People 2020*; in 2019, 8.3 per thousand for Navajo Nation versus 5.4 per thousand in Arizona and the 6.0 *Healthy People 2020* target) than surrounding state rates and national targets.<sup>11</sup>
- Although teen pregnancy rates have declined significantly across demographic categories over the decade, data for Arizona indicate much higher rates of teen pregnancy among Indigenous teens (e.g., in 2022, 13.9 per 1,000 among Indigenous teens compared to 10.0 per 1,000 in the general teen population in the state; in 2023 13.4 per 1,000 among Indigenous teens compared to 9.7 per 1,000 in the general teen population in the state) compared to their non-Indigenous peers.<sup>12</sup>
- 73% of young Navajo children live below 185% of the Federal Poverty Line.<sup>11</sup>
- A 2021 report indicated that ‘... about 33 percent of families on the Nation depend on the SNAP program to meet basic food needs,’ and that participation in the Special Supplemental Nutrition Program for Women, Infants, and Children (Navajo Nation WIC) was 82% of eligible women and children in 2020.<sup>11</sup>

- About one-third of Navajo homes are deficient in plumbing and kitchen facilities and do not have bedrooms. About 15% of Navajo homes lack water.<sup>13</sup>
- The drop-out rate in Navajo Nation reservation schools approaches 28% based on 2023-24 school year data;<sup>14</sup> and
- While Navajo students from six Navajo school districts in Arizona recorded significant gains in standardized test scores between 2023 and 2025, their performance on such tests still lags well behind the performance of their non-Indigenous peers.<sup>15</sup>

Implementing *Growing in Beauty* program, with home visiting services as key component of family intervention designed as a primary prevention strategy for early intervention and avoidance of future health and learning problems, is essential to bridging these gaps and securing the health and well-being of the Diné people and the Navajo Nation. Ultimately the program's vision is for all Navajo children to grow into beautiful individuals who are happy and healthy, and resilient. Which translates in the Diné language as '*Hozhóogo Jinóoseel*'.

The primary focus of the *Growing in Beauty* program with its emphasis on in-home interventions is on hard-to-reach, rural border areas across Arizona, New Mexico, and Utah; the most remote areas of the Navajo Nation. Home visitors travel hundreds of miles per week, often on unpaved roads, to connect with families that are not served by any other home visiting program and that may have few or no local services. Tribal services to these remote cross-border regions ensure responsive, flexible service delivery for families who would otherwise face restrictive, state-bound eligibility criteria.

*Growing in Beauty* delivers culturally grounded, evidence-based home visiting services that work to increase parental knowledge and involvement, provide early detection of health and developmental delays, prevent child abuse and neglect, and increase school readiness and success. Our home visiting integrates cultural enhancements into the curriculum and activities, to share the benefits of Diné culture and traditional customs that support Native family strengths and build resilience, combatting historical trauma.

We provide home visitation services utilizing the Parents as Teachers evidence-based model for families with children ages 0 to 5. When families enroll prenatally they can spend up to 5 years receiving home visiting services. Key elements of *Growing In Beauty* include:

- In-home education, with personalized sessions to increase parental knowledge, engagement with children, and child school readiness
- Comprehensive child screenings that offer early detection for child development, hearing, vision, and dental issues to ensure timely intervention before delays and conditions worsen
- Caregiver screenings, including screenings for maternal depression, interpersonal violence, and caregiver substance use
- Family support and referrals, including connections to vital social services such as housing, food, and health care
- Cultural preservation, through the integration of Diné culture and traditional customs to strengthen families and combat historical trauma.

The respect home visitors show to caregivers, working with them to respond to their goals and preferences, is part of what makes home visit approach successful. We selected the Parents as

Teachers evidence-based model because it addresses the needs of our families and can be implemented in our remote, rural communities. Ensuring fidelity to the model, home visitors have flexibility to focus with caregivers on the family's goals and priorities. As a result, home visiting looks a little different with each family, and each family may receive slightly different supports in addition to the core screenings and services. For example, some families might already have a primary care provider. They don't need a health care referral but might need help finding a stable living situation. Parents with a high school diploma don't need help signing up for a GED program but might need assistance finding childcare so they can enroll in virtual continuing education or look for work. Families are not required to adapt to home visiting; home visiting adapts to each family.

As part of our Tribal MIECHV grant, we record the results of our family screenings and services. While the most powerful evidence of home visiting effectiveness comes from feedback from families like the "Begays," our data documents that Navajo families need *Growing in Beauty* home visiting, and that it is making a difference. For example:

- Between 2016 and 2023, 24% of children enrolled in *Growing in Beauty* were identified with risks for developmental and/or social and emotional delays;
- 73% of families with identified risks were referred to early intervention for assessments and higher levels of care;
- As a result of the work of our home visitors, 74% of the children enrolled had documented well child visits with primary care providers;
- 34% of the caregivers enrolled in the program were identified as having risk for depression, domestic violence, substance use, and/or the need for general social services; and
- Of these caregivers, 26.5% had a documented referral for a service.

These are hard-won results achieved through significant efforts on the part of home visitors and caregivers. Still, more is needed. I wish I could tell you that 100% of families enrolled in the *Growing in Beauty* program received referrals for all the support and services they need to be healthy and happy. Even more, I wish I could tell you that every family was able to access the stable housing, health care, education and economic opportunity that enables them to thrive. In remote, lower income communities, documented referrals may also be lower because of lack of providers, long waiting lists, or extreme distances that must be traveled for services. Caregivers who lack childcare resources, transportation options, or time away from other responsibilities to take advantage of appointments—or who may not trust those services—may decline referrals when offered.

Through support to families and referrals to other needed services, home visiting helps to strengthen the families that can participate. However, *Growing in Beauty* also helps to strengthen the Navajo Nation's broader early childhood system by initiatives such as:

- Updating Community Needs and Readiness assessments
- Leading collaborative planning and continuous quality improvement (CQI) initiatives
- Partnering with the Navajo Nation Early Childhood Collaborative and promoting the Nation's emerging infant early childhood mental health consultation system.

The term “infant/early childhood mental health consultation,” or I/ECMHC, is easily misunderstood. I am particularly proud of this system, which our Nation is working to develop. I will share a little more information about the I/ECMHC with you. We hope to be able to train all of our home visitors in I/ECMHC so that they can deploy these skills to support parents during their home visits. Ultimately, we would like to offer this training to all professionals who work with Navajo families with young children. Despite its name, I/ECMHC is not a typical mental health service. Rather, this training helps adults support children’s healthy social and emotional development by promoting and facilitating parent-child attachment. I/ECMHC helps home visitors support parents who are dealing with the daily challenges of parenting very young children and trains them in how to help reduce parent stress. The training helps home visitors build their coaching skills so they can help parents better respond to the needs of their very young children, particularly when those children are too young to verbalize their own needs. Improved parent-child relationships contribute to healthy child development, reduced frustrations and reduced instances of inappropriate parenting. I am proud that the Navajo Nation is building out an I/ECMHC system. *Growing in Beauty* is an important component of this system, and our home visitors and families will directly benefit from it.

We are integrating the I/ECMHC into our larger Parent as Teacher-based service model with home visits representing a key component. The Navajo Nation competed for a Tribal MIECHV grant because studies of interventions featuring home visiting demonstrate reductions in pregnancy-induced hypertensive disorders, pre-term birth, and maternal depression. In home service delivery also offers opportunities to empower, educate, and build resiliency in mothers facing a variety of adverse circumstances that affect their health in the perinatal period and into their child’s early years, thus creating opportunities to impact long-lasting, positive changes for families.

Assessments carried out by *Growing in Beauty* home visitors indicate that nearly a quarter of enrolled children screen for developmental and other delays. The longer a child must wait to receive services to address a developmental delay, the more significant and entrenched the delay becomes. Results can include poor health outcomes and limited success in school, both of which are more costly to address the longer they persist without effective response. Home visitors carry out screenings to support early identification, and refer to early intervention services, helping to minimize delays and avert long-term negative impacts on health and learning.

The Navajo Nation is proud to be a Tribal MIECHV (TMIECHV) grant recipient, and thanks the Committee for making it possible for more of our sister Tribal nations to provide in-home services to their people as well. Nevertheless, it is painful for us to compete against other Tribes for TMIECHV funds, knowing that our success means another Tribe’s application may be reduced or denied. It is also painful knowing that successful proposals from other Tribes can result in Navajo families and communities losing their access to home visiting. All US states and territories receive MIECHV awards, and only Tribes and Urban Indian Organizations compete for grants. It will be a beautiful day when every Tribe and Urban Indian Organization is able to offer home visiting to every family that could benefit and wishes to participate. It will be a more beautiful day still when no member of any Tribe needs support from home visitors to grow and thrive.

Passage of the Jackie Walorski Maternal and Child Home Visiting Reauthorization Act was an important step in that direction. Prior to that reauthorization, \$12 million in Tribal MIECHV

(TMIECHV) funds were awarded each year to between 22 and 25 Tribes and Urban Indian Organizations. In total, TMIECHV supported services to about 1,650 families. Through passage of the Walorski Act, the set-aside for Tribal home visiting was doubled from 3% to 6% of overall funding. Today, as a result of that expansion, there are currently 53 TMIECHV grants in 21 states; up from 23 grantees in 13 states at the start of FY 2022. By the end of FY 2027, the Administration for Children and Families anticipates having as many as 70 Tribal MIECHV grantees. That means that about two years from now, approximately 11% of all eligible Tribes and Urban Indian Organizations will be able to receive TMIECHV funds to serve Native American and Alaska Native families.

It should be noted that in some cases, funds from state MIECHV awards are also used to provide services to Native American/Alaska Native children and families when state needs assessments identified the communities in which they live as a priority for state MIECHV programs and funds. In our case, the state of Arizona currently provides the Navajo Nation with a portion of its state MIECHV award through an Intergovernmental Agreement to provide home visiting services to Navajo families living on the Arizona portion of the Navajo Nation. We are working to access other funding sources and expand our Tribal MIECHV grant to the AZ and UT regions of the Navajo Nation. As mentioned previously, TMIECHV funds offer flexibility to serve Tribal families across state borders in a way that is unmatched by state MIECHV resources.

In the last Census, 2.1 million people self-identified solely as Native American or Alaska Native, without any other race. More than 6 million people self-identified as Native American or Alaska Native in addition to another race. It would be an overstatement to suggest that every Native American or Alaska Native family needs the support that home visiting can offer. However, home visiting helps to address the effects of historical trauma in Tribal communities in direct and impactful ways.

Thank you again for the opportunity to share information about the Navajo Nation's Tribal MIECHV *Growing in Beauty* home visiting initiative, and the needs and benefits of home visiting for Tribal communities across the United States. I look forward to responding to your questions.

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