Home Visiting: Improving Outcomes for Children

What Is Home Visiting?

Across the country, high-quality home visiting programs offer vital support to parents as they deal with the challenges of raising babies and young children. Home visiting is a prevention strategy used to support pregnant moms and new parents to promote infant and child health, foster educational development and school readiness, and help prevent child abuse and neglect. Participation is voluntary. Home visitors may be trained nurses, social workers or child development specialists. Their visits focus on promoting strong parent-child attachment and coaching parents on learning activities that foster their child’s development. Home visitors also conduct regular screenings to help parents identify possible health and developmental issues.

Legislators can play an important role in establishing effective home visiting policy their states. They may develop legislation to ensure that the state is investing in research-based home visiting models; that publically-funded programs demonstrate effectiveness; and that accountability measures are in place. Legislation may also deal with data collection and quality improvement mechanisms as well as strengthening program coordination.

Early Childhood Development and Home Visiting Programs

Supporting good parenting during children’s early years through high quality home visiting programs can improve outcomes for children and families, particularly those that face added challenges, such as teen or single parenthood, maternal depression and lack of social and financial supports. Recent research in neurobiology underscores the importance of children’s early experience in laying the foundation for their growing brains. According to the National Scientific Council on the Developing Child at Harvard University, “…[T]he experiences children have early in life—and the environments in which they have them—shape their brain architecture and strongly affect whether they grow up to be healthy, productive members of society.” Children’s early brain development influences cognitive skills, emotional and social competence, and physical and mental health that will enable them to achieve in school and later in life. Home visiting can help moms and dads lacking good parenting examples, dealing with unemployment or depression learn how to support their children’s development.

This story is an illustration of how home visiting can work:

Alicia, six-months pregnant, faced the same challenges that test all new parents, but she also had to deal with several additional burdens: she was seventeen; her baby’s dad wasn’t around or willing to help. She was estranged from her alcoholic mom and shared a house with four other people. Alicia was excited about her baby, but she didn’t know how to be a good mom.

Alicia’s role as a mom, and her baby Emma’s future, changed when she learned about a home visiting program in her town. Alicia worried that she would have been lost without the help given to her by Sue, a nurse who became her home visitor. Sue came to visit Alicia weekly in her home, even before Emma was born. During their early meetings, Sue taught Alicia about the importance of taking care of her health and nutrition while she was pregnant. She helped Alicia stop smoking because of how it could affect her baby.

After Emma was born, Sue helped Alicia understand about infant care and nutrition and how she could support Emma’s emotional, cognitive and physical growth. Sue worked together with mom and her baby, showing Alicia the value of positive back-and-forth interactions and coaching her as she fed, comforted and played with Emma. Sue’s visits continued until after Emma was two. She helped Alicia as Emma reached new stages of development and introduced her to new learning activities to help prepare Emma for pre-school. Alicia says that Sue has taught her about the importance of reading to her baby, even at her early age.

Sue also worked with Alicia on developing her own life goals. Alicia completed high school and is attending community college. She lives in her own apartment. She wants to be a social worker and help other young women like herself. She says being in the program has changed her and Emma’s lives.
Rigorous evaluations of high-quality home visiting programs have shown that programs that focus on supporting families with tough challenges can improve critical child outcomes:

- cut the number of low-birth-weight babies\(^1\);
- reduce the rate of child abuse and neglect by nearly one-half\(^i\);
- improve kindergarten readiness and increase reading and math test scores in grades 1-3 by 25 percent\(^ii\), and
- increase children’s, of mothers participating in home visiting, high school graduation rates by 60 percent\(^iii\).

Cost benefit analyses were conducted by both RAND and the Washington State Institute for Social Policy on the Elmira site of the Nurse Family Partnership Program and found for Public Policy cost-benefit analyses show that high-quality home visiting programs offer returns on investment ranging from $1.26 to $5.70 for every dollar spent due to reduced costs of child protection, k-12 special education and grade retention, and criminal justice expenses\(^1\).

**Home Visiting Programs and Models**

Most states have invested state funds in home visiting programs over the past decade, often creating them in different departments such as health, education and human services. Some programs closely follow national evidence-based models, such as Early Head Start, Healthy Families America, Home Instruction for Parents of Preschoolers (HIPPY), Nurse Family Partnership, and Parents as Teachers. (Click here for a full list of federally approved models.) Some states implement hybrid programs, using materials from national models, but adapting services to local resources and needs.

With the passage of the federal Maternal, Infant and Early Childhood Home Visiting program in 2010 there has been an increased focus on evidence-based models which has led many state agencies and legislators to consider whether their programs meet the highest standards. Legislators can understand the quality of their home visiting programs by determining whether programs implement the practice standards of a specific evidence-based home visiting model and/or whether the programs meet the research-based standards of effective home visiting that apply to all program models:

- **Targeted**: Services need to focus on the families facing the most disadvantages. Research shows that these families are where home visiting can make the greatest impacts.
- **Intensive**: Visits should start early and extend for a long period of time, most usefully from before birth to the third year of the child’s life. They also should be frequent, meaning at least once or twice every month in the beginning as the home visitors develops a relationship with the family and then tapers off as the child grows older.
- **Trained**: Home visitors should receive specialized training in early childhood development, children’s health, parenting, and child development, often through a combination of post-secondary education and model-specific training.

Federal Resources and Opportunities

The federal home visiting initiative, the Maternal, Infant and Early Childhood Home Visiting (MIECHV) program, provides states with substantial resources for home visiting: $1.5 billion over five years until September 2014 with an option for reauthorization. Set to expire at the end of 2014, Congress authorized a six month funding extension. Forty-seven states and D.C. have claimed federal formula funding that ranges from $1 million to $11.5 million per year (Florida, North Dakota and Wyoming have chosen not to participate.) Thirty-two states have also received additional competitive grant funding. (State-by-state funding is available here.)

The federal initiative emphasizes evidence-based home visiting models, so that 75 percent of the federal funding must go to programs that have been verified as having a strong research basis. Fourteen models have met this standard (for models that meet HHS criteria click here.)

Governors designated state agencies to receive and administer the federal home visiting funds. These state leads provide a useful entry point for legislators who want to engage their state’s home visiting programs (The list of state leads for the federal MIECHV program can be found here.) Legislatures can play a key role by advancing legislation that helps coordinate the variety of state home visiting programs as well as strengthening the quality and accountability of those programs.

Advancing State Policy

State officials face difficult decisions about how to use limited funding to support vulnerable children and families. Evidence-based home visiting can achieve positive outcomes for children and families while creating long-term savings for states. Many states have recently passed legislation on home visiting (legislation listed here). Several key policy areas are particularly appropriate for legislative action:

- **Goal-Setting:** What are they key outcomes a state seeks to achieve with its home visiting programs? Examples include improving maternal and child health, increasing school readiness and/or reducing child abuse and neglect.
- **Evidence-based Home Visiting:** Have funded programs demonstrated that they delivered high-quality services and measurable results? Does the state have the capacity to collect data and measure program outcomes? Is the system capable of linking data systems across public health, human services, and education to measure and track short and long-term outcomes?
- **Accountability:** Do home visiting programs report data on outcomes for families who participate in their programs? Do state and program officials use data to improve the quality and impact of services?
- **Effective Governance and Coordination:** Do state officials coordinate all their home visiting programs as well as connect them with other early childhood efforts such as preschool, child care, health and mental health?
- **Sustainability:** Are state officials developing a vision that will inform state funding decisions in an effective way, based on clear improvement in outcomes and returns on investment?

