

Testimony of Ardith Crampton
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71 Haynes Street, Manchester, CT 06040

RE: H.B. No.6365, AN ACT CONCERNING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE 30, 2011 AND MAKING APPROPRIATIONS THEREFORE

I am Ardith Crampton, Manager of Eastern Connecticut Health Network's Family Development Center and Nurturing Families Network program, one of the programs administered by the Children's Trust Fund. I am here today to support the Children's Trust Fund and its status in administering the Nurturing Families Network program.

Nurturing Families Network (NFN) begins its support of families as soon as they become new families. NFN staff members, representing the Children's Trust Fund, meet first-time parents prior to the baby's birth or right in the hospital after delivery. They welcome the baby, offer information, and conduct a brief, informal family risk assessment. Based on the assessment, the family may receive voluntary home visiting, supportive telephone calls from trained volunteers, and/or community-based parenting classes. Many program participants are teen and single parents with dysfunctional family history, poor educational achievement, and minimal work history. Their education begins right then and there—in fact, it often begins soon after a young woman discovers that she is pregnant, with a home visitor who may follow the family for as long as 5 years. Home visits focus on teaching child development, conducting child developmental screenings, teaching appropriate parenting skills, and case management. The goal is reduced incidence of abuse and neglect and increased parental skill while promoting educational achievement, employment, and economic stability in the home.

The fundamental philosophy is to identify and address factors linked to child abuse or neglect **before** such behaviors occur—to support and educate young parents most at risk **before** their circumstances cause desperate or unwise action—**before** a situation escalates and DCF involvement becomes necessary. Success in prevention is obvious. For the target group of at-risk parents, the expected substantiation rate for child abuse and neglect would be 20-25%. Among Connecticut NFN families, the substantiation rate has averaged only 3% over the last few years.

Achieving these results is a tough, sensitive job. It is easy to see why the Children's Trust Fund was created to meticulously oversee this program and others, rather than to overburden DCF, which has its own serious challenges. The Children's Trust Fund provides extensive training and technical assistance to NFN staff, via a statewide, consistent, sequential and well-researched system for training, support, and program improvement. Home visitors are all trained and certified in the Parents as Teachers program. All staff receive intensive pre-service orientation and regular, face-to-face support with Trust Fund program specialists. In addition, the Children's Trust Fund has initiated several important efforts, responding to the needs of at-risk families. They

address such issues as Shaken Baby syndrome, fatherhood involvement, and detecting and treating maternal depression. These initiatives have arisen in response to needs and risk factors identified over ten years of program experience. The Children's Trust Fund supports a program which exemplifies a nurturing, educational environment for its staff and for the families they serve—the sort of nurturing environment every family should have.

Through successful expansion over the last decade the program is now in every Connecticut birthing hospital, ensuring universal screening and engagement. Hospitals welcome Nurturing Families Network staff into their birthing units; families welcome them into their homes. That welcome relies on an understanding that they are dealing with a Children's Trust Fund representative, dedicated to support and **prevention**. Families "sign on" assured that their home visitor does not represent DCF, but rather a supportive team (parent, hospital, home visitor, Children's Trust Fund, community) that will work for the best possible family outcome. That outcome is knowledgeable, effective, self-confident parents, who utilize their strengths, nurture their children and do not require DCF involvement. These are families more likely to become self sufficient and good parents, with children more likely to thrive. These are families less likely to tax state services, with children less likely to enter the child protective service system.