

February 9, 2010

Dear Representatives and Legislators of Connecticut,

My name is Migdalia Belliveau and I am the program manager for Nurturing Families Home Visitation Program at the VNA Healthcare in Hartford. The Governor's mitigation plan to eliminate the Home Visitation Program will have direct impact on families that are most vulnerable and in need of true support.

Our program has been funded by the Children's Trust Fund since 1995. We are one of the oldest sites in Connecticut. The agency has developed a network that provides services to first time parents who are isolated in their own community. The VNA Healthcare which is affiliated with Hartford Hospital has been targeted for closure. The VNA Healthcare works directly with ST Francis Hospital which has a home visitation component. The Governor's proposal to "eliminate expanded non-hospital sites", leaves Hartford Hospital will only one component of Nurturing Families. Eliminating the home visitation component is not an effective strategy. One hospital in the city cannot possibly be expected to take responsibility for the patients at another hospital. Perhaps this is an oversight by the decision makers or an uninformed decision to cut services for patients that have just delivered at Hartford Hospital.

During my employment with the VNA, we have worked with many programs and agencies to improve outcomes by reducing child abuse and neglect and; by preparing **your young constituents** for preschool and kindergarten. The families have increased and improved their parenting skills; they want to keep their children with them. The families want to be good parents but as I stated earlier, they are the most vulnerable and in need of support.

Your young constituents are unfortunately unable to write or speak directly to you and express to you that they want. The children want to remain in their own homes with their parents. They want parents that are attached and that love them. Have you ever seen a child removed from their home? We have, it's disheartened to see a police in the home that provides an oversight while the child is being removed. The families and the staff are emotional and everyone is trying to maintain a smooth transition as the worker takes the child with only a paper bag of clothes. We have witnessed this event and it's very sad. In our program, we have to attend court and we conduct the visits with the worker to teach parenting skills and to set goals for the family to have their child returned home. Have you ever seen when the visits are over how much the child wants to go back with their parent? Your constituents' ages are on average 2, 3 and 4 years old **TODDLERS**. When they witness their own removal; they are not able to understand why or when if ever they will be back in their home with their parent. Truly, we respect and understand that there are times when a child needs to be removed but with Nurturing Families in place, most of the children at the VNA Healthcare remain in the home. The

referrals to protective services are low. VNA Program staff has provided services to over 1,000 families.

Our site is also noted for accepting referrals from CT Children Medical Center to help parents with children with special needs. Children's Trust Fund programs are currently reaching over 17,000 families. Cutting Children's Trust Fund services would leave thousands of families without resources to cope with multiple challenges.

Research has shown that participation in CTF programs dramatically reduces the risk of child abuse and neglect. The program helps the families to improve their life circumstances, including high school completion, independent living and employment. Every year, the program has families that "graduate" from this five year program.

CTF programs are cost effective. The most intensive program funded by CTF is Nurturing Families Network, which cost \$3,400 per year for a family. Compare this to \$30,000 per year for each substantiated DCF case and more than \$44,000 per year for each inmate in CT's correctional system.

Cutting the program will actually cost the state more in mandated spending for children who end up as DCF cases due to lack of CTF prevention services that families willingly accept in their homes. Having DCF involves more than the social service system; it also increases the need for law enforcement, judiciary and correctional systems.

Hopefully, all of us can understand that not only is this service beneficial to the families, but it actually saves the State of Connecticut money.

Respectfully submitted,

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