STATE OF CONNECTICUT
OFFICE OF EARLY CHILDHOOD

Connecticut Office of
Early Childhood

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Testimony of Myra Jones-Taylor, Ph.D., Commissioner
Office of Early Childhood
Before the Committee on Children
S.B. 321 – An Act Concerning an Infant and Toddler Education and Development Program
Tuesday, February 17, 2015

Good afternoon Senator Bartolomeo, Representative Urban, and distinguished members of the Committee on Children. I am Myra Jones-Taylor, Commissioner of the Office of Early Childhood. I am here today to testify on S.B. 321 – An Act Concerning an Infant and Toddler Education and Development Program. This bill would establish an infant and toddler education and development program for parents to reduce child mortality rates and increase learning of young children.

I would like to highlight several programs that work to reduce child mortality rates and increase learning of our infants and toddlers. Within the Office of Early Childhood, major programs that provide support and information to parents include the state-funded Nurturing Families Network, federal Maternal Infant and Early Childhood Home Visiting (MIECHV) program, and Help Me Grow. In addition, the Birth to Three program, within the Department of Developmental Services, provides in-home support for children age birth to three with developmental delays. The Department of Children and Families also funds Child First and other home visiting programs for at-risk families. The State Department of Education funds Family Resource Centers, which include a home visiting component in their program. And finally, federally funded Early Head Start includes a home visiting component, working with very low-income parents with infants and toddlers.

I would like to focus my testimony on home visiting programs generally in Connecticut. Home visiting programs are designed to promote child wellness and development, strengthen families, and prevent child neglect, maltreatment, and abuse. Professional home visitors build relationships with families to provide resources, treatment, screening, parenting information, and support during pregnancy and throughout the child's early years in places where the families are already caring for their children, most often the home. Programs build on family strengths and provide individual support focused on both the child and the caregivers.

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Connecticut home visiting programs are tailored for and provided to families who can most benefit from additional support while they are raising young children. Support is provided to the people in a child's life who play a critical role in their growth and development and who are responsible for creating a nurturing environment. Typically home visiting is offered to families in poverty or who face barriers to children's healthy growth and development.

Early childhood home visiting is an effective prevention strategy that improves outcomes for young children and parents. High quality, research-based home visiting programs have been shown to:

- improve healthy child development across all domains (language development, cognition, physical development, social and emotional development, etc.)
- prevent child injuries, child abuse, neglect, and maltreatment; and
- improve pregnancy birth outcomes and preconception, prenatal, and inter-conception care;
- reduce emergency department visits and hospitalization;
- improve school readiness and attendance and decrease the grade retention and achievement gap;
- reduce crime and domestic violence;
- improve maternal and child health including maternal depression;
- improve family economic self-sufficiency and life skills; and
- improve the coordination of and referrals to other community resources and supports.

The Office of Early Childhood released a report in December 2014, "Connecticut Home Visiting Plan for Families with Young Children," pursuant to P.A. 13-178. The report was developed in collaboration with a large number of stakeholders, both inside and outside state government. The purpose of the report was to build a framework to better coordinate and integrate home visiting programs in Connecticut. We believe this report is an important first step in building a home visiting system that produces better outcomes for our youngest children. The Executive Summary of the report is attached to this testimony.

The report recommendations reflect robust, cost-effective, and practical next steps. When implemented, they will achieve increased administrative efficiency, improved program quality, and improved experiences for the families and children seeking or receiving support. In the long term, they will increase transparency to the legislature, improve access to home visiting programs for families, and foster meaningful collaboration across home visiting programs. The Office of Early Childhood has committed to convening a Home Visiting Consortium work group to work on implementing this plan.

Thank you for the opportunity to appear before you today and I would be happy to take any questions.

Connecticut Home Visiting Plan for Families with Young Children

Executive Summary

Connecticut Office of
Early Childhood

December 2014

Pursuant to Public Act 13-178 and Submitted to Connecticut General Assembly

Submitted by:

Myra Jones-Taylor, Commissioner

Connecticut Office of Early Childhood

Introduction

Adverse childhood experiences have a lasting and profound impact on the lives of children and many families need support to ensure a great start for their young children and their families. Home visiting programs in Connecticut are designed to provide families with precisely that support. The State and Federal investments in home visiting must be expanded upon and better coordinated to create a *system* of home visiting that effectively meets the needs of families and children.

Families with young children in Connecticut face a multitude of challenges that negatively affect parenting, maternal and child health, child development, and school readiness. Connecticut has high rates of poverty, unemployment, homelessness, crime, domestic violence, maternal depression, child maltreatment, substance abuse, and teen parenting. Children living in poverty are at greater risk for developmental and behavioral problems, health issues, learning disabilities, cognitive delays, and neglect and abuse. The majority of maltreatment cases are neglect, resulting from extreme poverty. The number of children living in poverty in Connecticut continues to remain stubbornly high, increasing 17 percent since 2008.

The following recommendations include practical ways to improve coordination of home visiting programs and strengthen key infrastructure of the system for referral, trainings, coordination, and reporting. When implemented they will achieve increased administrative efficiency, improved program quality, and improved experiences for the families and children seeking or receiving support. In the long term they will increase transparency to the legislature, improve access to home visiting programs for families, and foster meaningful collaboration across home visiting programs.

The recommendations reflect robust, cost effective, and practical next steps and identify and a clear path forward. This effort, prompted by legislation, reflects another step forward toward creating a fully coordinated system of home visiting that is integrated into Connecticut's behavioral health, family support, early care and education, health, and comprehensive early childhood service systems. The Office of Early Childhood is prepared to take on a key role in their implementation going forward.

A Vision for a Coordinated Network of Home Visiting Programs in Connecticut

All families should have access to high quality, home-based services and supports they need. Home visiting programs should be fully coordinated with each other and with other systems of care such as health, mental health, early childhood services, and early care and education. When the vision of a home visiting system becomes a reality:

Families will voluntarily welcome the support provided without stigma because:

- families are respected as partners;
- support is available for all parents and primary caregivers;
- the support provided is non-judgmental, culturally appropriate, builds upon family strengths; and
- the support provided is of value to the family.

Programs will be part of a coordinated network that ensures:

- a diverse set of programs are available to meet a broad range of family and child needs;
- sufficient funding is allocated to state agencies for home visiting programs and that funding is used to provide appropriate supports for the needs of all families and children;
- services are easy to access, follow the family, are well-coordinated, and adapt over time to changing needs of families in Connecticut; and
- programs are staffed by people who are well trained and represent the culture and languages of families served.

The State of Connecticut will invest in high-quality home visiting programs at a level that matches the demonstrated need for services because home visiting programs:

- have a significant positive collective impact on families and Connecticut as a whole; and
- help prevent the need for costlier services.

Why Invest in Home Visiting?

Early childhood home visiting is an effective prevention strategy that improves outcomes for young children and parents. Research has shown that adverse childhood experiences have a significant impact on long-term adult mental and physical health and the earlier in a child's life home visiting support is provided, the greater the potential for having long-lasting positive results. High quality, research-based home visiting programs have been shown to:

- improve healthy child development across all domains (language development, cognition, physical development, social and emotional development, etc.)
- prevent child injuries, child abuse, neglect, and maltreatment; and
- improve pregnancy birth outcomes and preconception, prenatal, and inter-conception care;
- reduce emergency department visits and hospitalization;
- improve school readiness and attendance and decrease the grade retention and achievement gap;
- reduce crime and domestic violence;
- improve maternal and child health including maternal depression;
- improve family economic self-sufficiency and life skills; and
- improve the coordination of and referrals to other community resources and supports.

	Per Person Cost	Aggregate Cost
Preterm Births	The *additional annual cost* per infant born preterm is **$51,600.**	**$26.2 billion** annual costs nationwide associated with premature births (which make up 7 percent of births in Connecticut in 2013)
Child Abuse and Neglect	The *lifetime cost* of one victim of maltreatment due to adverse health, mental health and economic consequences of maltreatment is **$210,012.**	**$124 billion** total lifetime economic burden of all maltreated children in the US in 2008.
Special Education	The *annual cost* per child for special education in Connecticut is approximately **$16,000.**	**$1.7 billion** annual cost of special education services in Connecticut and only 10 percent of costs paid for by Federal funds. Special education funding makes up over **21 percent of total education spending** in Connecticut and costs are growing at an average of 5 to6 percent per year.

What Is Home Visiting?

Home visiting programs are designed to be effective at promoting child wellness and development, strengthening families, and preventing child neglect, maltreatment, and abuse. Professional home visitors build relationships with families to provide resources, treatment, screening, parenting information, and support during pregnancy and throughout the child's first eight years in places where the families are already caring for their children, most often the home. Programs build on family strengths and provide individual support focused on both the child and the caregivers.

Who Is Home Visiting For?

Connecticut home visiting programs are tailored for and provided to families who can most benefit from additional support while they are raising young children. Support is provided to the people in a child's life who play a critical role in their growth and development and who are responsible for creating a nurturing environment. This can include expectant mothers, parents, grandparents, foster parents, and child care providers. Typically home visiting is offered to families in poverty or who face barriers to children's healthy growth and development. Programs also serve families who face specific challenges which put families and children at risk such as a preterm birth, a child with developmental delays or behavioral concerns, or adults with substance use problems.

What Home Visiting Programs are in Connecticut?

There are many programs in Connecticut that provide regularly scheduled services to families in their homes.

Large, Statewide Home Visiting Programs	• Birth to Three • Child First[1] • Early Head Start • Family Resource Centers (Parents as Teachers) • Nurturing Families Network (Parents as Teachers) • Young Parents Program
Department of Children and Families Home Visiting Programs	• Caregivers Support Team • Integrated Family Violence Services • Intensive Home Based Services- Family Based Recovery • Level 4 Positive Parenting Program (Triple P) • Child First
Developing, Regional, or Pilot Home Visiting Programs	• Family School Connection • Minding the Baby • Nurse Family Partnership • Parents as Teachers (MIECHV) • Nurturing Families Network: Fathering (MIECHV)

[1] Child First is partially funded by DCP but not restricted to DCF families.

Recommendations

Recommendation #1: Ensure Families Have Access to Appropriate Home Visiting Services

The needs of families vary greatly and in Connecticut there is a broad portfolio of programs that deliver services in the home tailored to meet these needs. However, home visiting programs are not all statewide and there is a different set of home visiting programs available to each family.

1.1 Secure additional funding from all available sources to expand capacity of the existing home visiting system to meet the needs of families and children throughout CT.
1.2 Fund to increase capacity of home visiting system to special populations
1.3 Establish home visiting system governance and collaboration infrastructure

Recommendation #2: Strengthen the Referral Infrastructure

Families who need support should be able to find and access the program or programs they need easily. An effective referral system is critical to achieving this.[2] While there are many investments in referral and intake infrastructure already in place, they are not sufficiently funded or coordinated adequately to allow them to reach all families in Connecticut.

2.1 Improve public awareness, knowledge, and perception of home visiting programs.
2.2 Expand and strengthen the capacity of referral infrastructure: Child Development Infoline (CDI)
2.3 Increase the local, community-based, grassroots referrals to home visiting programs.

Recommendation 3: Establish a Core Set of Competencies and Coordinate Training

In order to develop an appropriately skilled workforce for home visiting programs, sufficient resources should be allocated to ensure the workforce is well trained.

3.1 Create a central training institute to support home visiting program that builds on existing resources.
3.2 Develop core competencies that align across all early childhood disciplines and services.
3.3 Conduct an analysis of the home visiting workforce.

Recommendation #4: Ensure Program Standards Promote High-Quality Programs

Many home visiting programs in Connecticut already have robust program standards, particularly those which rely on evidence-based models. Programs use standards to ensure that high quality services are delivered in a particular way with fidelity to the evidence-based model. For evidence

[2] Referrals should include the DCF home based programs, if age eligible and voluntary.

based programs, the fidelity to model is required in order to conduct research and maintain funding.

4.1 Build on strong existing program standards.

Recommendation #5: Develop Outcome Measures and Report on Progress

The vision is to create a reporting system that will drive quality, provide information to decision-makers, and enhance transparency while adding minimal administrative burden on home visiting programs. A core set of common outcomes and process measures that span most, if not all, programs should be developed to show the collective impact of home visiting programs on children and families. The most valuable *additional* report would contain information on the home visiting field as a developing system and should be presented to legislators annually in the Results Based Accountability (RBA) framework.

5.1 Finalize Results Based Accountability Population level Framework
5.2 Pursue a data and research agenda for unavailable critical indicators
5.3 Convene a study committee to develop performance and outcome measures for the home visiting system.
5.4 Begin annual Results Based Accountability reporting on the home visiting system to the legislature from the Office of Early Childhood in 2017.