

# UNIVERSITY OF HARTFORD

## CENTER FOR SOCIAL RESEARCH

STRENGTHENING COMMUNITIES THROUGH RESEARCH

Testimony of C. Wesley Younts, Ph.D., Allison Joslyn and Marcia Hughes, Ph.D.

Center for Social Research, University of Hartford

Before the Appropriations Committee

Public Hearing Re: Governor's Proposed Budget Adjustments

February 16, 2016

Good evening distinguished members of the Appropriations Committee. My name is Wes Younts and I am the Director of the Center for Social Research at the University of Hartford. We are an independent evaluator of state and federally funded programs in Connecticut. I am here today to testify before this committee on behalf of the *Nurturing Families Network* program, administered by the Office of Early Childhood Family Support Services Division, currently under the Children's Trust Fund line-item. We have conducted ongoing evaluations of the NFN home-visiting program for over *twenty-one years*, and it is from this larger, research and evidence-based perspective that I provide this testimony.

In general, I respectfully oppose the Governor's proposed budget adjustment, which would result in an overall cut of around \$12.5 million to OEC programs that provide services to vulnerable families and young children in Connecticut. Importantly, the Governor's budget proposal marks a radical departure from current legislative practice by consolidating the OEC's program-specific line-items into a single "Agency Operations" line that includes most of the OEC's direct service programs, leaving discretion for which programs are cut or reduced in the hands of the commissioner, which creates unnecessary uncertainty regarding the impact of the Governor's proposal for the families and agencies providing them services.

While budget cuts may be necessary, I urge the Legislature to not allow cuts in funding to programs that provide valuable, high-impact services and support to Connecticut's most vulnerable populations through models that are evidence-based and have demonstrated their value and success. Specifically, the Nurturing Families Network (NFN) is a **high quality, evidence-based program that warrants continued state support**. NFN provides a statewide system of continuous care designed to promote positive parenting and reduce incidents of child abuse and neglect. The program currently provides services out of 38 state, community, and private non-profit agencies in all regions of the state, and provides screening in all 29 birthing hospitals (as well as private clinics and community agencies). Here are a few of the *most important* reasons why the NFN program deserves and requires continued support:

- **Focus on Evidence-Based Practices and Continuous Quality Improvement:** Since 1995, the program has demonstrated an unparalleled commitment to systematic, independent evaluation and the use of research evidence to enhance, refine and revise program policies and practice – their mantra has always been “good, bad, or indifferent, we want to see the data.” Emerging evidence obtained through ongoing annual process and outcome evaluations, annual Results Based Accountability reports, and quarterly Quality Assurance reports is efficiently and conscientiously incorporated into policy/practice through the ongoing, collaborative Continuous Quality Improvement team (Foley-Schain, Finholm & Leventhal, 2011). In addition, the NFN home-visitation model has adopted the nationally recognized, evidence-based Parents as Teachers curriculum (<http://www.parentsasteachers.org/>). As a result, we regularly cite NFN as a model for other agencies we evaluate.
  
- **Focus on Prevention:** Rather than waiting until a problem requiring intervention is detected, which is ultimately more expensive in the long term, the program is proactive and prevention focused.

  - NFN staff screen approximately 6,000 families statewide each year. Approximately 33-42% are identified as experiencing a high-risk for child maltreatment and are referred to the intensive home-visiting program, while those families who do not meet the eligibility requirements are referred to the Nurturing Connections telephone referral and support service.
  - Prenatal screens: 8% of all screens and 42% of those mothers who ultimately enroll in the program were screened prenatally, providing the greatest potential for prevention.
  - In addition to screening for the risk of child maltreatment, NFN staff have conducted ASQ screening for early detection of developmental delays for an average of nearly 1400 children each year, providing referrals and connecting parents to services such as Birth-to-Three for the 2-6% who show evidence of delays annually. Such early identification is critical for providing support to children and families who would otherwise experience exponential difficulties and barriers to success in the critical early school years.
  
- **Focus on Vulnerable, “High-risk” Families:** Cutting funding for the NFN program would have a disproportionate impact on the state because the program serves many of the most vulnerable, socially isolated families across the entire state, with a concentration of services in the urban core of Hartford and New Haven.

  - Approximately 2100 families participate in the NFN home-visiting program annually, with an average of 750 new families enrolling each year. These families receive an average of nearly two-and-a-half home-visits per month, focused on providing a comprehensive and personalized support system, including parenting

education (e.g., child development, parent-child bonding), connecting families to community resources, and preventing incidences of child maltreatment.

- 60% of families enrolling in NFN experience moderate to severe levels of family stress (e.g., parents' own history of childhood abuse/neglect, social isolation, depression/mental illness, criminal history, history of substance abuse) when they enroll in the program. Annually, approximately 8% of families enrolling in NFN are characterized as experiencing "acute" stress due to severe mental health problems, substance abuse, or interpersonal violence in the home.
  - In addition, in 2014, around 61% of families enrolling in NFN were experiencing financial difficulties, 50% were participating in WIC, 33% were receiving food stamps, 15% were socially isolated, and 10% were receiving TANF.
  - IN 2014, approximately one-third of mothers were teens and around 80% were single at the time their child was born; approximately 30% did not have a high school diploma/GED and 52% were unemployed when they enrolled in the program.
  - Approximately 15% of children in the program were born prematurely and another 15% had low birth weight.
- **NFN Home-Visiting Yields Proven Outcomes:** Over 20 years of evaluating the NFN home-visiting program in Connecticut has proven that it yields impressive results for participating families, as reported in our Annual Outcome Evaluation (e.g., Joslyn, Younts and Hughes 2015) and annual RBA reports, in terms of reducing incidences of maltreatment, improving parenting attitudes, improving parents' knowledge and use of community resources, and improving parents' own life-circumstances.
    - A study conducted by collaborators from the Center for Social Research and the Yale School of Medicine indicates that, among families who were identified by NFN staff as "high-risk" between 2008 and 2011, those who enrolled in NFN were *1.5 times less likely* to have a subsequent substantiated DCF child maltreatment report than those who did not enroll in the program (Leventhal et al. 2016).
    - Over the years, our research has consistently found that the rigidity of mothers' parenting attitudes (a correlate of maltreatment) is significantly reduced after participating in home visiting for at least 6 months and up to five years (Damboise & Hughes, 2011; Joslyn, Younts and Hughes 2015).
    - Over the years, our research has consistently demonstrated that mothers experience significant improvements in their knowledge and use of community resources (i.e., transportation, budgeting, support services, support/involvement, interests/hobbies, and regularity/organization/routines) after participating in NFN home visiting for at least 6 months and up to five years (Damboise & Hughes, 2011; Joslyn, Younts and Hughes 2015).

- Additionally, mothers in NFN home-visiting also experience significant increases in education and employment and significant decreases in financial difficulties and social isolation after at least 6 months in the program.
- **Short-term Cuts Will Come with High Long-term Costs:** Cuts to the OEC’s statewide home visiting program Nurturing Families Network will result in a significant loss of Federal funds to the state. Over \$29 million in federal funding is available to Connecticut’s home visiting efforts under Community Based Child Abuse Prevention (CBCAP) and Maternal Infant and Early Childhood Home Visiting programs (MIECHV). However, state cuts in its General Funds to home visiting programs would likely violate the memorandum of agreement with the federal agencies, risking loss of the federal funds or requiring the state to pay back the Federal Government the amount of the state cutback, effectively doubling the dollar impact on the state. Not only would such action threaten the health and wellbeing of thousands of Connecticut families, *it simply does not make financial sense.*

I would like to conclude with a story from one of the more than 10,000 parents that the NFN home-visiting program has served since 1995.

This mom was feeling stuck; she was in a relationship with an emotionally abusive partner and living with his family, who also were not treating her well (she “felt like the housekeeper”). When her baby was born, she became even more isolated – more and more she stayed to herself, in her bedroom, and eventually she stopped going to school, and spiraled into clinical depression – she didn't have any hope for herself and as a result was full of potential harm for her baby.

Because of the close, trusting relationship her home visitor had forged with her (a true “therapeutic alliance”) and the efforts of the home-visitor to connect her with appropriate clinical treatment, she became willing and able to see a therapist. This was a turning point, and with the strength she gained through counseling, and again with encouragement and help from the home visitor, she was able to gather up her resources to move into her own apartment, get a job, and then successfully transition to another job when the first one didn't work out. All the while, the home visitor was the person she turned to when she needed concrete support (everything from diapers to completing job applications), emotional support/perspective, help understanding her baby's needs (and her own needs as well), and the necessary encouragement to keep moving forward. The home visitor helped her to understand and attend to her baby’s needs (e.g., establishing a consistent sleep/nap routine), and even gave her enough confidence to focus on her own personal development, as she is now planning to back to school and her baby is in daycare. By playing the critical role of a consistent, supportive person who the mom could depend on, the home visitor helped strengthen all the protective factors promoted by the strengthening families model and that years of research on resilience have shown make a real difference in preventing the downward spiral that seemed so inevitable for this mother. As the mother told us in an

interview, *“I am trying to be more independent. [My home-visitor] helped me a lot; she gives me a lot of advice and tells me to go back to school even if I just take one class at the time. She told me I am smart and that I needed to go back to school, so I think I am going to start taking some classes next semester to see how it goes.”*

In sum, I oppose the Governor’s proposed budget and urge the Legislature to carefully consider the severe impact on Connecticut’s families and children before reducing the budget of the Nurturing Families Network and other OEC programs. Please do not hesitate to contact me if you have any questions or further information.

Sincerely,

**C. Wesley Younts, PhD**  
**Associate Professor and Director, Center for Social Research**  
**Department of Sociology and Criminal Justice**  
**University of Hartford**  
**200 Bloomfield Avenue**  
**West Hartford, CT 06117**  
[younts@hartford.edu](mailto:younts@hartford.edu)  
**860-768-5974**