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January 9, 2011

Testimony to the Achievement Gap Task Force

In Support of Home Visitation Services

Honorable Committee Members:

My name is Cheryl Burack and I'm representing Coordinating Council For Children In Crisis, Inc. and the Coalition for Nurturing Families Network. I am here to emphasize the importance of early home visitation services to vulnerable families that will reduce the achievement gap by positively impacting children's health, social, emotional and cognitive development beginning at birth. Home visitation can be the first line of defense in seeing that vulnerable children arrive at school healthy, nurtured and ready to learn. We know that early development is strongly affected by the home environment and family characteristics, and that early experiences and school readiness are linked. If we wait until children enter preschool, it can be too late. In fact, early experiences and the infant's interaction with his or her environment, facilitated by the parent, impact the development of the brain and the way the pathways in the brain are wired. It is not just genetics but the responsiveness of the parents, daily experiences, physical activity, love and nurturing and food and nutrition that directly impact brain development. What happens during the first three years is critical: by age three, 80% of brain growth is complete.

Unfortunately, we have infants being raised in homes with multiple risk factors such as poverty, domestic violence, and neglect by parents who do not have the experience or knowledge to understand their role in their child's development. As their child's first teacher, they need parent education and guided practice to help them understand how their early interactions with their children promote secure attachment and impact their cognitive and social-emotional development. Connecticut's Home Visitation Think Tank noted that very vulnerable families need an intervening person but rarely reach out for a service or support. For many of these families, a home visitor may be the only outsider who sees the family on a regular basis, putting him or her in a unique position to identify and address problems early and to positively impact children's learning outcomes and help the family build a strong foundation for future success right from the start. For example, in the Nurturing Families Network home visitation program, health, nurturing parenting, parent's life course, and school readiness all must be addressed with families during every developmental stage from birth through age five. For your information, I have attached a Home Visitation record to my testimony. Furthermore, results-based outcomes for the program show that the immunization rate for 2 year olds is 93%, compared to 66% for a similar population on Medicaid, that 98% have a pediatric medical provider for ongoing care, that 95% demonstrate normal development and the child abuse rate is 2% as opposed to 20% in similar populations.

The Children's Trust Fund has been building a universal statewide home visitation program that can be expanded to serve a broader population and serve as a model program that screens, assesses and educates high risk, underserved and English-limited parents and their infants and toddlers. It is free to families, voluntary, and strength-based, easily accessible to families, and has an infrastructure that includes staff training, support and results-based accountability. The CT Departments of Public Health and Children and Families also fund home visitation services. Now we need a home visitation system,

not just a program, which identifies and provides a coordinated continuum of home based and related services available prenatally and through the early years; a system that is coordinated across state departments, provides incentives for collaboration at the local level and works with other state programs through Memorandums of Understanding to reduce duplicative paperwork and streamline processes for families. Most importantly, this would be a system that works together to promote and improve positive health, cognitive, and social and emotional developmental outcomes for children that eliminate Connecticut's achievement gap.

Thank you.

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