



The Advocate



Home Visitation: A Good Beginning for All

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TCCY Policy Advocate

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Calendar of Events

Events relating to helping children are available at: www.tennessee.gov/tccy/webcalen.pdf.

TCCY

For more information on the Tennessee Commission on Children and Youth and its programs, check out the website at www.tn.gov/tccy.

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Home visitation programs provide families with the support they need for the development of healthy and successful children. Research shows early childhood programs promote healthy physical and socio-emotional development of children. In the first years of a child's life, caregivers play an essential and active role in their baby's healthy development, which can be difficult without support. Many parents and caregivers encounter challenges like stress, geographic and social isolation, and poverty that can adversely impact their ability to support their child's development in the early years.

Home visitation programs can provide families with much needed support, including education, health and mental health, as part of a comprehensive and coordinated system of care. The voluntary program provides services appropriate to the needs of individual families, offering guidance and support in the home environment. While there are several different program models, with varying goals and services, in general they combine parenting education, health care education, child abuse prevention, and early intervention and education services for young children and their families.

Quality home visitation programs have demonstrated success in reducing child maltreatment in high-risk families, with single or young mothers, low-income households and families with low-birthweight infants. By reducing the incidence of low-birthweight births, home visitation programs can save states between \$28,000 and \$40,000 for intensive care and other avoidable high cost services per low-birthweight baby.

They give me a sense of security in knowing that I am doing it right.
Home Visitation Client

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Photo from Nurses for Newborns

Child maltreatment, including abuse and/or neglect, is not only traumatic and can result in state custody, it also increases the risk of adverse consequences among maltreated children, including early pregnancy, substance abuse, school failure and mental illness. Children who have been physically abused are also more likely to exhibit aggressive behavior and violence later in their lives. Research suggests states can collectively save a portion of the \$33 billion a year in child abuse and/or neglect related costs like hospitalization, law enforcement and foster care by investing in quality home visitation programs.

Child maltreatment and other adverse childhood events have lifelong effects, including higher incidence of illness, poorer quality of life and early death. The Adverse Childhood Experiences (ACE) study has followed 17,000 children who were surveyed and examined between 1995 and 1997. A higher number of adverse childhood experiences was associated with more health risks and increased prevalence of adult diseases.

While home visitation programs may be diverse in their focus, population served and outcome goals, they provide the foundation for parents and caregivers as they play a critical role in influencing their child's health and development. Quality home visitation programs are a sound long-term investment in the future of Tennessee.

Home Visitation in Tennessee

Department of Health Programs

Policy makers at the national and local levels have identified the value of home visitation programs. Development of a program in Tennessee, operated by the Department of Health (DOH), began over 30 years ago with the implementation of the Child Health and Development Program (CHAD). The program was developed out of a research and demonstration project at Peabody College at Vanderbilt University. The model included a team consisting of a nurse, social worker, lay home visitor and nutritionist available when needed. Periodic assessments were completed to evaluate the child's development, and parenting education was provided. Unfortunately, the funding to support the program shifted and resulted in changes in the program requirements and availability. The team model no longer exists, and the program is only available in 22 counties.

It feels like someone is understanding you, if you are stressed you can bawl your eyes out and they won't think you are crazy.
Home Visitation Client

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As a result of the Tennessee Child Development Act of 1994 (TCA 37-3-703), the state was mandated to implement the Healthy Start home visitation program based on the Healthy Start - Hawaii model. The program is currently available in 30 counties through eight contracted community-based agencies. DOH receives interdepartmental funding from the Department of Children's Services (DCS) to operate the Healthy Start program. The program model has the primary goal of reducing or preventing child abuse and neglect in participating families. The national Healthy Start model has also shown results in a higher percentage of women in the program receiving adequate or better prenatal care, having adequate or better prenatal care experiences and having adequate or better number of prenatal care visits.

They turned things around for me, setting goals, writing them down and making me want to achieve them.

Home Visitation Client

In the 1990s, DOH began developing the home visitation model now called Help Us Grow Successfully (HUGS). The program is available in all 95 counties and was developed to improve birth outcomes and increase the number of children who receive Early and Periodic Screening, Diagnosis and Treatment (EPSDT). DOH receives funding from the Bureau of TennCare for the HUGS program.

The final home visitation program operated through DOH is the Nurse Family Partnership (NFP). As a result of legislation (TCA 68-1-2501), DOH was charged with establishing, monitoring and reporting on the NFP pilot project. NFP is a nationally recognized, evidence-based model using nurses as home visitors. The pilot program is located at Le Bonheur Children's Hospital in Memphis and is still in development. The legislation expands the program as funds become available.

Department of Children's Services (DCS): Children's Trust Fund

In addition to the DOH CHAD and Healthy Start programs, home visiting programs are funded through the Children's Trust Fund in DCS with federal Community Based Child Abuse Prevention (CBCAP) funds. The Children's Trust Fund is currently funding grants at Catholic Charities, Exchange Club Center of the Mid-South, Le Bonheur Children's Medical Center and Nurses for Newborns. These competitive grants integrate "Strengthening Families" principles. Strengthening Families is a research-based, cost-effective strategy to

Home Visitation Programs 2007 Children Served As a Percent of Age 0-5 Population



Source: Home Visitation Review, July 2010

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Rate of Children Served in Home Visitation Programs Compared to Number of Children in Poverty, 2007



Source: Home Visitation Review, July 2010

increase family stability, enhance child development and reduce child abuse and neglect. Home visiting programs are using the Strengthening Families approach to build the five evidence-based Protective Factors in families. The five Protective Factors include parental resilience, social connections, knowledge of parenting and child development, concrete support in times of need and children’s social and emotional development. Research shows these Protective Factors reduce the incidence of child abuse and neglect by providing parents with the resources, services and supports they need to be successful.

Some weeks this is the only person I see.
Home Visitation Client

Home Visitation Collaboration

In addition to the programs through DOH, several other home visitation programs and models are offered in Tennessee. In an effort to create a statewide connection among all programs, the Tennessee Home Visitation Collaboration (HVC) was developed in 2006. Based on the National Collaboration model, a collaboration of local providers, state agencies, advocates and other stakeholders works together to improve the quality of home visitation programs and ensure service availability to expectant families in need of support.

The Collaboration also includes other state departments, early childhood partners, the Governor’s Office of Children’s Care Coordination, Fight Crime Invest in Kids, UT Agriculture Extension Service/Center for Parenting and TCCY. The HVC membership includes several home visiting program models from different parts of the state. The diversity of programs represented in the Collaboration reflects the varying missions, goals and eligibility requirements of the models present in Tennessee. In addition to the state operated home visiting programs, a very active member of the HVC is the evidence-based program model, Parents as Teachers, which has 13 programs located in Tennessee. Another program represented on HVC is the nurse-based, Nurses for Newborns, located in Nashville.

Some of the initial goals of the Collaboration were to develop shared outcome measuring information, increase coordination of services for families, support the development of a system of care for home visitation and identify all the programs, including the model and description, available in the 95 counties. The HVC provided support to Child and Family Services in Knoxville and Le Bonheur in Memphis in their successful application for national evidence-based home visitation funding. The two federally funded Nurse Family Partnership programs are active members of the HVC. The Collaboration is working to help inform the application process

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as DOH moves forward with pursuing the newly available federal funding for home visitation. The Collaboration also continues to develop strategies to increase public awareness and promotion of home visitation services. Participating members view the collaboration as an opportunity to position the state to apply for available federal funding to maintain, strengthen and expand home visitation programs. The Home Visitation Collaboration is coordinated and facilitated by Carla Snodgrass, executive director, Prevent Child Abuse Tennessee.

Home Visitation Review

In July 2009, the Governor's Office of Children's Care Coordination (GOCCC) initiated a home visitation program review. The review increased the visibility of quality home visitation programs and prepared Tennessee to effectively compete for federal dollars, anticipated through the federal Patient Protection and Affordable Care Act health care reform act. The GOCCC invited several partners to contribute to the review, including the HVC, parents and caregivers, DOH, DCS, Department of Education's Tennessee Early Intervention System (TEIS), Department of Mental Health and Developmental Disabilities (DMHDD), Tennessee Commission on Children and Youth (TCCY), and Office of the Special Assistant to the Governor, and also received guidance from the Children's Cabinet. One objective of the review was to create a comprehensive inventory of available home visitation programs. The review team distributed a survey template designed by TCCY to all known home visitation programs. The information gathered helped paint a picture of Tennessee's home visitation programs, including service descriptions, availability, number of children and families served, and funding sources. The review team completed its work and submitted a report in July 2010. The data and recommendations in the report have been instrumental as Tennessee applies for federal funding. The report is available at <http://www.tn.gov/goccc/reports/docs/homevisitation.pdf>.

I am so much a better parent than I was when they started.

Home Visitation Client

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**Home Visitation Review 2010
Recommendations for Future Work**

- Assure organized, accountable referral and service delivery systems;
- Identify a continuum of early childhood services;
- Develop an evaluation system using common, measureable outcomes among HV programs;
- Use the information developed during the 2010 Home Visitation Review to help guide the growth of Home Visitation services under the new federal guidelines and funding opportunity.

Data related to birth outcomes and child well-being are available online from TCCY's KIDS COUNT project at <http://datacenter.kidscount.org/data/bystate/State-Landing.aspx?state=TN> and <http://www.state.tn.us/tccy/kc.shtml>.

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The Future of Home Visitation in Tennessee

Federal Funding Opportunity

Through the passage of the *Patient Protection and Affordable Care Act* in March 2010, Tennessee is eligible to receive \$3 million in federal funding for home visitation programs. The Administration for Children and Families and Health Resources and Services Administration under the Federal Department of Health and Human Services outlined the purpose of the federal legislation:

- To strengthen and improve the programs and activities carried out under Title V of the Maternal and Child Health block grant;
- To improve coordination of services for at-risk communities, and to identify and provide comprehensive home visiting services to improve outcomes for families in at-risk communities.

The purpose of home visiting programs, as outlined by this group, is to promote:

- Improvements in maternal, prenatal, infant and child health and development;
- Increased school readiness;
- Reductions in the incidence of child maltreatment improved parenting related to child development outcomes;
- Improved family socio-economic status; greater coordination of referrals to community resources and supports; and reductions in crime and domestic violence.

The governor appointed DOH as the lead agency for the application and coordination process. It has submitted the first two parts of the three-part application. The initial brief statement of need and proposed structure (part one) and the formal needs assessment (part two) were submitted and accepted by the U.S. Department of Health and Human Services. The third and final grant application guidance was recently released. The final part of the application will present the complete state plan identifying the geographic locations, the eligible programs using evidence-based models of successful home visiting and the organizational and administrative structure for implementing and evaluating home visitation in Tennessee.

The new funding opportunity will allow Tennessee to strategically plan for expanding and strengthening home visiting services to support families in the early years of parenting and improve outcomes for Tennessee's children.



Photo from Nurses for Newborns

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Future of Existing Programs

Tennessee has a history of supporting home visitation programs by mandating implementation of quality home visitation services; however, the state is now in jeopardy of losing two of its critical programs. Both CHAD and Healthy Start were funded with non-recurring dollars for FY 2010-11 and are at-risk of losing their funding after June 30, 2011. The end of current non-recurring funding for Child Health and Development (CHAD) and Healthy Start home visitation programs will erode the foundation of quality home visitation programs providing children and families opportunities to be successful. Home visitation programs are one of the most important things the state can provide to improve long-term outcomes for vulnerable children.

Home Visitation Outcome Measures

- Parents interact with their children in ways that enhance children's development and early learning.
- Children are healthy.
- Children live in a safe environment.
- Families access formal and informal support networks.
- Children achieve optimal milestones in development and early learning.

Source: Wisconsin's Child Abuse Prevention Fund 2008 Outcome Attainment Report, reported in the Home Visitation Review 2010.

Quality home visitation programs for high-risk families, high-risk infants and young children could be instrumental in reducing premature and low-birth-weight babies, infant mortality and child abuse; improving immunization rates; and increasing parental understanding of the developmental needs of their children. Available data demonstrates children served by these programs have better outcomes on some measures than the state as a whole. The Commission on Children and Youth is committed to efforts to maintain and improve quality home visitation programs in Tennessee. They are a wise investment in improving outcomes for young children. 

NOTE: Comments from families receiving services from home visitation services were collected during "Community Cafè" focus groups organized by Prevent Child Abuse Tennessee.

Tennesseans Creating Solutions Across the State

AARP, the League of Women Voters and TCCY are leading an initiative of individuals and organizations serving vulnerable populations to assure the state continues providing a supportive environment for its citizens despite current challenges.

The initiative calls on experts, including members of these vulnerable populations, to create strategies to protect the infrastructure that has been carefully built to connect our communities and those populations to needed services.

The effort began in September with "Creating Solutions: A State Budget Forecast and Policy Forum." A follow up forum, "Next Steps," held in October focused on developing the skills to put that expertise to work and included step-by-step reports on successful efforts. Efforts to sustain essential services and supports will continue and are spreading across the state. A second "State Budget Forecast and Policy Forum" was held in Knoxville.

Contact TCCY for more information about the events and the materials provided. 

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Children's Advocacy Days, March 15-16

The Art of Children's Advocacy

For 23 years TCCY has equipped child advocates with information and skills to help them speak out on behalf of the state's children. However, we know advocacy is more than just information, rules and relationships: It's an art.

The Art of Advocacy is the theme for the 2011 Children's Advocacy Days (CAD).

Arts – music, dance and visual, fine and crafty, high and low – are at home in Tennessee. Whether internationally recognized like folk sculptor William Edmondson or just enjoyed by friends and family, artists add meaning to life in this state. And a life well lived is a work of art.

Art and creative expression are also powerful tools for reclaiming young people at risk.

TCCY will be calling upon artists, young and old, to paint the picture of advocacy and to showcase the talents of young Tennesseans.

Many advocates have gathered for most of the more than 20 years TCCY has organized CAD. This year they will be getting to know new faces, as the state has a new governor and many new legislators. And, new people will be introduced to the Art of Advocacy.

More information on CAD is available on the TCCY website(www.tn.gov/tccy).

2011 CAD Awards

TCCY believes hard work needs to be recognized. Two groups often ignored are the people who quietly go about fighting for our children, and those children who have been “given a bad name” by their involvement with juvenile court and have successfully struggled to live it down, as we say in the South.

Each year TCCY honors individuals drawn from these groups at CAD. Tennesseans may nominate advocates for the Jim Pryor Child Advocacy Award and youth who have had contact with the juvenile court for the Youth Excellence Award using forms available on TCCY's website.

Forms may be filled out online, printed and mailed to TCCY. The nomination for the Jim Pryor Child Advocacy Award is available at <http://www.tn.gov/tccy/aw-pryor11.pdf>. The Youth Excellence Award nomination form is at <http://www.tn.gov/tccy/aw-yexcl11.pdf>.

TCCY does not solicit nominations for the KIDS COUNT Media Award; however, please contact your regional coordinator or Fay Delk (fay.delk@tn.gov) to commend media outlets who have done a good job of covering children's issues.

