

A nurturing childhood leads to a strong, productive adult who will contribute great things to our society. But let's face it, raising children is challenging and difficult even in the best situations. So, where do our most vulnerable families turn when they don't have the support they need?

Home visiting programs recognize parents are children's first teachers, but sometimes even parents need help. Nurses and other trained professionals visit with women, families and children as early as the beginning of pregnancy to promote positive birth outcomes and provide parent education and support, ultimately promoting child health, well-being, learning and development.

Voluntary, evidence-based home visiting programs can lead to a reduction in child abuse and neglect, as well as improved family health,

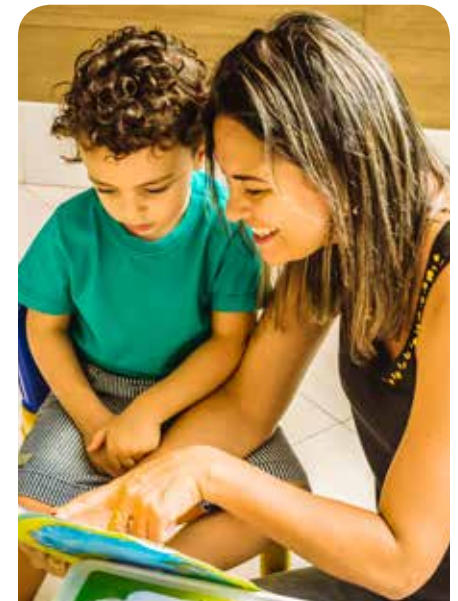
literacy and economic security.¹

There are four evidence-based home visiting models operating in Pennsylvania using nearly \$50 million in state and federal funding to support these programs.

Each evidence-based home visiting program has nationally established, model-specific standards, accountability measures and fidelity requirements. While the models share an interest in supporting families, each has distinct characteristics and meets families' needs in different

Childhood Begins at Home

ways. In communities where multiple models deliver services to families, the models frequently refer to each other to respond to family needs and preferences.



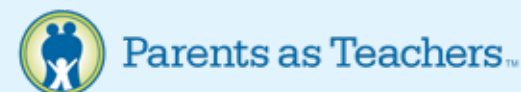
EHS enhances the ability of low-income families to meet the developmental and early learning needs of their children at home.



HFA strengthens families by promoting positive parenting, enhancing child health and development, and preventing child abuse and neglect.



NFP pairs first-time, low-income pregnant women with nurses to improve pregnancy/birth outcomes, child health and development, and family economic self-sufficiency.



PAT builds the capacity of parents to care for their children, while promoting school readiness and healthy child development.

Strong Families, Strong Kids

Evidence-based home visiting is an effective tool to support the development and safety of our most vulnerable children and their families.

Far too many of Pennsylvania's youngest children are at risk of child abuse and neglect, live in poverty, and experience poor education and health outcomes. At times, parents and others raising these children also need support to improve their education, health and economic stability. Pennsylvania has a unique opportunity to build on its 2017 expanded investments in all evidence-based home visiting models and address the significant unmet need that still exists.

“ There's no magic bullet to changing the adverse circumstances far too many of our children live in. More and more children are being born to parents suffering from substance use disorders or living in families that are just struggling to make ends meet. Home visiting programs provide families with the supports, skills and confidence they need to be successful. Families benefiting from these programs are better equipped to provide a home environment that is conducive to the child's healthy and safe development. An increase in state funding for evidence-based home visiting programs will help bridge the obstacles that too often hold these children and families back from reaching their full potential. ”

- Lee Sizemore, Director of Human Services for McKean County



To make matters worse, many families and caregivers are living through the horrors of the opioid epidemic and find themselves in a crisis that is in great need of attention.

In Pennsylvania alone, there were almost **1,800 live Medicaid births with a diagnosis of neonatal abstinence syndrome (NAS)** in 2016². Babies born with NAS may show signs of drug withdrawal as a result of being exposed to drugs in the womb, either through prescribed medications or illegal drugs³.



In home visits, nurses and other trained professionals engage with a pregnant woman or mother, as well as her partner and other family members. **Home visitors encourage recommended steps to ensure a healthy pregnancy and baby.** And, with the guidance of other health care professionals, support prevention, treatment and recovery.



While home visiting is not a treatment program and should not be used as an alternative to treatment, **it can be a helpful tool in strengthening families grappling with substance use disorders.** Working in partnership with other community-based services and treatment teams, evidence-based home visiting is another protective mechanism for at-risk infants and young children.

Building Successful Families



The key is to start at home, helping children and their families with the tools and resources they need to be successful. At times, parents and others raising children need support.

Childhood Begins at Home is a statewide campaign designed to help policymakers and the public understand the value of evidence-based home visiting and effective ways to support parents. The campaign partners include Fight Crime: Invest in Kids, Maternity Care Coalition, Pennsylvania Head Start Association, Pennsylvania Nurse-Family Partnership, Pennsylvania Parents as Teachers, Pennsylvania Partnerships for Children, and Trying Together. Campaign partners are encouraging state and federal lawmakers to continue to build on the strong investments they have made in evidence-based home visiting and increase investment to serve many more Pennsylvania children and families who would benefit. The research is clear: these efforts will reap strong rewards, and the results will include reduced child abuse and neglect and improved family health, education and economic security⁴.

“ The opioid epidemic in Pennsylvania is sadly more and more evident in hospital neonatal units every day. In 2015, babies born with substance issues spent 27,835 days in the hospital, costing the Medicaid program an extra \$20.3 million. This needs to change – our children deserve more. We must take real steps to help our moms and their babies. This begins with good prenatal care and follows with services that meet the health, learning and development needs of our young children. The time has come for us to advance real solutions that will help our state reduce Medicaid costs. One such solution is evidence-based home visiting, which improves health, pregnancy and early literacy outcomes, and reduces child abuse and poverty. ”

- Dr. Robert Cicco, Pittsburgh Neonatologist, Allegheny County Medical Society President and the former President of the PA Chapter of the American Academy of Pediatrics

Ask anyone who has ever been a parent and you will hear that parenting is the most rewarding, but toughest job anyone ever had. Many parents benefit from strong family supports and more-than-adequate resources to support them in this critical role. However, for some parents, many of whom are young and of modest means, parenthood is much more complicated.

The good news is that evidence-based home visiting programs can positively impact the lives of these young families, building confidence and imparting them with the tools necessary to overcome many challenges so they can successfully raise their children⁵.

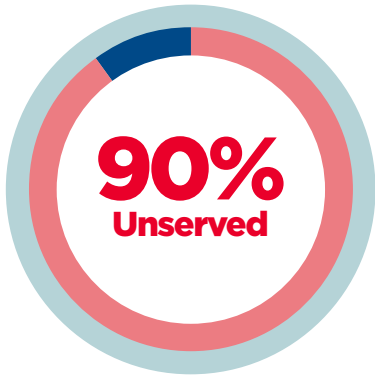
“ Ask any district attorney what cases they remember and continue to haunt them, and you will likely hear a story about child abuse. Last year, more than 5,000 children in Pennsylvania were placed in foster care because of parental substance abuse. These numbers are going up each year, in part, because of the opioid crisis. We can't simply police or prosecute our way to safe families and communities. We need to do more to support families that are struggling to raise their children, even when they may be fighting substance use disorders. That is why I support more state funds for evidence-based home visiting programs. These programs have been proven to reduce child abuse and help families break the cycle of violence and substance abuse. ”

- Matthew D. Weintraub, Bucks County District Attorney

Babies don't come with a book of instructions, and as children grow into their toddler and preschool years, their needs grow and so can the challenges. Parents in our state who are struggling to make ends meet and juggling the challenges of raising their young children would benefit from supports to help them learn about positive parenting, appropriate health and nutrition, literacy, and managing their family budget. Unfortunately, too few get this support.

Pennsylvania

Improving Health

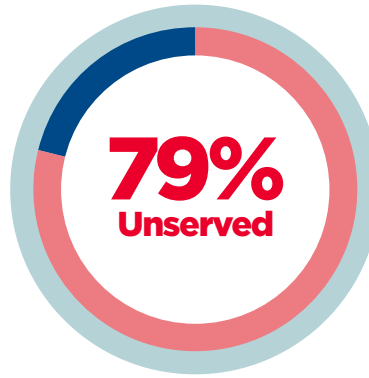


4,300
Children served by
HFA and NFP

40,632
Unmet need

44,932
Medicaid births

Preventing Child Abuse and Neglect

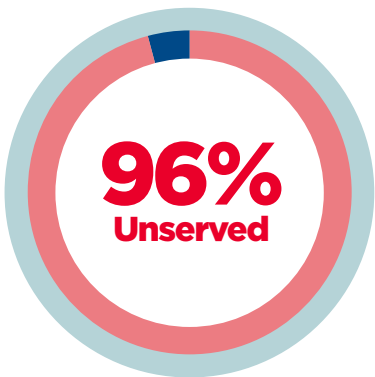


4,300
Children served by
HFA and NFP

16,075
Unmet need

20,375
Children age 0-5
known to the child
welfare system

Reducing Poverty

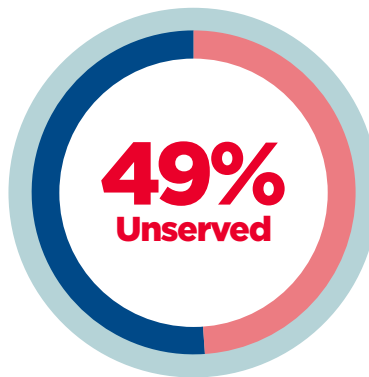


14,070
Children served by
EHS, HFA, NFP, and
PAT

344,026
Unmet need

358,096
Children in poverty

Improving Literacy



9,770
Children served by
EHS and PAT

9,535
Unmet need

19,305
Births to mothers
without a high school
diploma

Let's Take the Next Step Now

The evidence is clear that these investments will improve child and family outcomes. At a time when so many children, families and communities are affected by the opioid epidemic, we must do more. Evidence-based home visiting is part of the solution.

Childhood Begins at Home urges the General Assembly to support a \$6.5 million increase in the 2018-19 state budget (\$5.3M in the Community-Based Family Centers and \$1.2M in the Nurse-Family Partnership line items) to: expand evidence-based home visiting to an additional 800 families; train professionals to better support families dealing with the opioid crisis; and provide a COLA to NFP and PAT.

This increase in evidence-based home visiting programs will help families and children build the foundation for a successful future.

Let's invest now to help at-risk children receive the support they need to be Pennsylvania's future leaders.



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