



Parenting Works in Oregon

The Public Safety and Health Benefits of Home Visiting

Acknowledgements

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Fight Crime: Invest in Kids

Thousands of police chiefs, sheriffs, prosecutors and violence survivors protecting public safety by promoting solutions that steer kids away from crime

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40%
of young children in Oregon will face issues that put their healthy development at risk

Summary

The birth of a child presents new opportunities and challenges for families. The challenges are often exacerbated for families who face difficult circumstances—such as poverty, unemployment, or single parenthood—and those who have few positive parenting role models to look to for guidance. However, all families can benefit from the individualized care that home visiting programs provide.

That’s why these voluntary programs have been proven to be so powerful—they offer mentorship from a trained educator, from pregnancy or early infancy into the first few years of a child’s life, using the simple logic that parenting works. Through periodic home visits, parents are equipped with the tools and skills they need to stimulate their child’s development and avoid harmful parenting practices that can result in neglect or abuse.

Home visiting also has benefits that extend well beyond the family. High-quality programs for high-risk parents can improve public safety by reducing child abuse and neglect and preventing involvement in crime. They can also strengthen the economy by fostering families’ economic independence, helping children become productive adults. When parents take advantage of the resources available through voluntary home visiting, entire communities benefit. Universal home visiting programs can provide health assessments and screenings, health education for parents, and referral to additional services.¹

Benefits of Home Visiting and Successful Oregon Programs

Programs such as Healthy Families Oregon (HFO), a part of Healthy Families America, create a continuum of care for children before birth or early infancy through age



three, as well as provide services and interventions that can meet families' needs. This program is part of the home visiting continuum across the state that includes programs like Family Connects, Nurse Family Partnership, Early Head Start, and others. HFO serves nearly 3,300 families annually, in 35 of Oregon's 36 counties. In 2018, the program was accredited by Prevent Child Abuse America, and is the largest child abuse prevention program in Oregon.² This was the third accreditation for the state; the program was first accredited in 2007, then again in 2012.

HFO works to support child health during the first three years of life by connecting families to nutrition and other health services, and educating families about health and wellness. In the 2016-2017 evaluation of the program, children who participated in HFO for at least six months

were more likely than Oregon children who did not participate to be connected to preventive health services, and babies of mothers who received prenatal screening were less likely to be born premature.³

Families that participated in HFO have experienced positive outcomes, such as reduced child maltreatment, and improvements in school readiness. Parents in the program were more likely to read to their children; 70 percent reported that they read to their children every day, which helps improve future school readiness. The majority of parents (94 percent) also engaged in developmentally supportive and positive interactions with their children, and parenting-related stress, a risk factor for child maltreatment, decreased in 65 percent of parents who participated.⁴ Additionally, over 90 percent of parents who participated in the program reported that their home visitor helped them build a social support network.⁵ Additionally, among children who participated in Early Head Start and Oregon Pre-K, over 80 percent met or exceeded expectations for measures such as language, literacy, and social-emotional skills.⁶

In FY2017, Oregon received federal funding from the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV), enabling the state to provide evidence-based home visiting services for 923 families at any given time. The funding supports Early Head Start, Nurse-Family Partnership, and Healthy Families Oregon in 13 communities, and has served over 4,000 families.⁷ Oregon's population is at high risk; over 73 percent of households were low-income, and 31 percent of households reported a history of child maltreatment.⁸

Home Visiting: A Crime-Prevention Strategy

Children under the age of three are most at risk for abuse or neglect, compared to children of other ages.¹³ One in seven families that enroll in federally-funded home visiting programs report a history of child maltreatment, and many more have factors that put them at risk for abuse or neglect.¹⁴ The experience of neglect or abuse as a child is associated with several negative outcomes throughout life, including being twice as likely to commit a crime by age 19.¹⁵

High-quality home visiting programs for high-risk families can help prevent later crime by preventing child abuse and neglect. The longest-running study of home visiting followed participants in the Nurse-Family Partnership (NFP) program over two decades, and demonstrated that, by age 15, children in NFP had half as many verified incidents of child abuse and neglect as children in the control group who didn't participate.¹⁶

Moreover, by age 19, **children in the control group had twice as many arrests and more than twice as many convictions** than their counterparts who received home visits.¹⁷ The results were concentrated among the girls in the program: young women who did not participate in NFP averaged nine times more convictions than young women who participated.

The study also found that home visiting reduced crime among parents. Specifically, mothers in the control group had more than three times as many criminal convictions 15 years after the program compared to mothers who participated in NFP. Control group mothers also spent more time in jail.¹⁸

The Need for Home Visiting in Oregon

In Oregon, there are nearly 140,000 children under the age of three.¹⁹ Preventing abuse and neglect among young children is especially important; in

Family Connects

One example of a successful home visiting program is Family Connects, based in Durham, NC. Family Connects is an evidence-based, universal nurse home visiting program designed to provide risk screenings and brief intervention, as well as connect families with additional services if necessary.⁹ The program works with hospitals and birth attendants to connect with all parents of newborns shortly after birth to schedule a home visit and ensure the family has access to necessary resources. Participation is voluntary, and families may be encouraged to enroll in other programs such as Healthy Families America, Early Head Start, or Nurse-Family Partnership, if eligible.¹⁰ In a study of over 500 families who participated in Family Connects, emergency medical care for infants decreased by 50 percent during the first year of life.¹¹ Additionally, mothers reported more positive parenting behaviors such as reading to their child, and better quality home environments that included books and other learning materials. The program estimates that for every dollar invested, there is a savings of \$3.17, primarily from the reduction in emergency medical care.¹²

2017, 26 percent of substantiated victims of neglect or abuse were under three years old. Of those cases, 47 percent were younger than one year.²⁰ Further, it is estimated that 40 percent of young children in Oregon (birth through kindergarten-age) will face physical or socioeconomic issues that put their healthy development at risk.²¹

While home visiting can help reduce these risks, only about 20 percent of eligible Oregon families are receiving home visiting services because of resource constraints and limited capacity.²² Between 2014 and 2016, there were over 136,700 babies born in Oregon; Medicaid covered over 61,200 (nearly half) of those births.²³ Among pregnant women on Medicaid, only 18 percent of those potentially in need of home visiting received services. Only 36 to 43 percent of the eligible population of children from birth to age four were served.²⁴ During FY2016-17, Healthy Families Oregon provided care for only 16 percent of all births;

there were over 580 families who were screened and found eligible for the program, but could not receive services because capacity had been reached.²⁵ This illustrates the significant unmet need among families who could benefit from increased voluntary home visiting services across the state.

To address this need, Oregon should invest in the universal, short-term, nurse home visiting program that is able to reach more families and connect them with existing home visiting programs and other needed services. Oregon should also increase investments in programs like Healthy Families Oregon, to ensure that families who need more intensive home visiting programs will have access to them. By supporting all families in accessing necessary resources during the first months of a child's life, our state can promote positive experiences in early childhood, building a foundation for lifelong health and well-being.

Conclusion

Oregon's existing home visiting programs provide a critical system of preventive care for families, but these programs are narrowly targeted, intensive, long-term, and lack the sufficient funding necessary to provide help for all the families that need it. A shift towards home visiting that reaches a wider population would not replace existing programs; rather, it would identify what more families want and need, have participants only utilize the services they need, and provide an entry into the system of care that is tailored to each family.

Voluntary home visiting programs are based on a simple premise: parenting works. By coaching parents at a pivotal point in their lives, home visitors help parents provide children with a strong and stable upbringing and become self-sufficient. As a result, high-quality programs have benefits ranging from public savings and reductions in health care costs to less child abuse and neglect and crime reduction. By increasing home visiting services, more Oregon children will be ready for school, and will have the chance to grow up to be healthy and productive adults. One way this can be done is through additional funding for Healthy Families Oregon, and first-time funding for Universal Connects to make these programs more accessible to families and to retain high-quality staff.

Endnotes

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