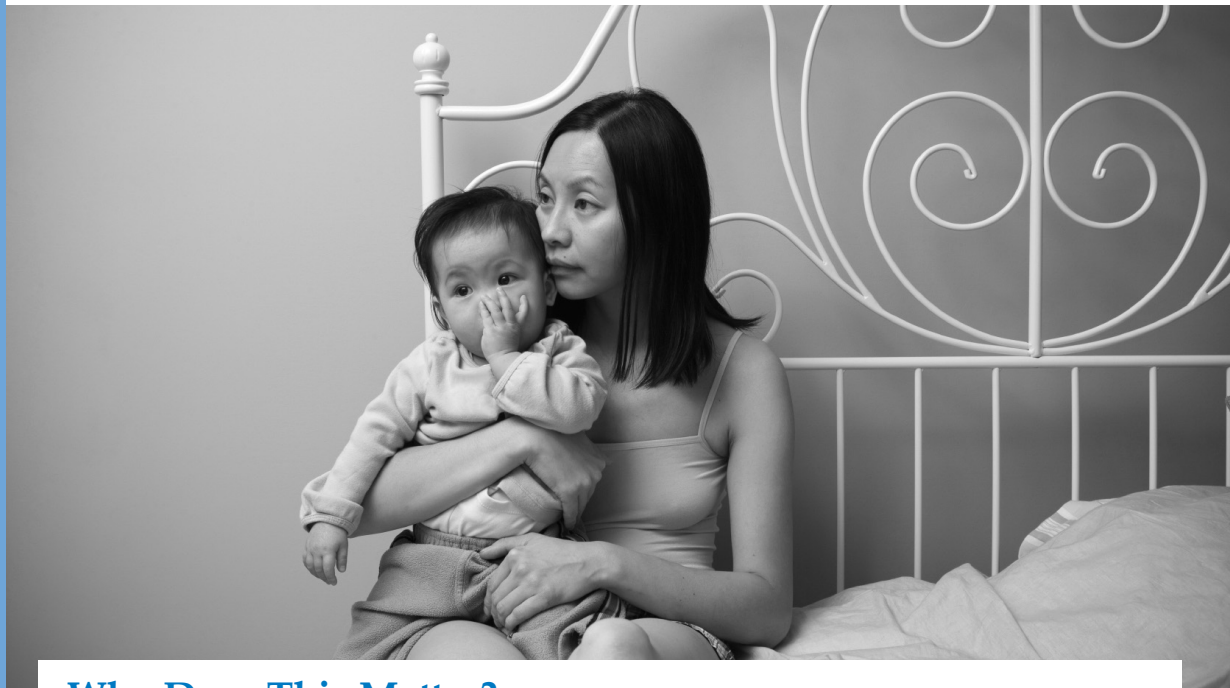


Home Visitation: Part of a Comprehensive Approach to Improving the Lives of Poor Families



The Society for Research in Child Development (SRCD) is an interdisciplinary organization of scientists, established in 1933 by the National Academies of Science.

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Why Does This Matter?

In the United States, 42 percent of children under 6—a total of 10.2 million children—live in poverty. These youngsters are more likely than better-off children to experience a range of problems. One way to address the educational and health needs of these often hard-to-reach children is through home visitation—sending individuals into homes to match needs with services. Recent developments—policymakers’ renewed interest in home visitation and efforts to ensure that programs are more effective and coordinated—signal a new era for this approach to early intervention.

Policy Implications

Because research on home visitation has been inconclusive (see “What the Research Says”), policymakers are divided over its value. Instead of looking at programs in isolation, home visitation is being reconsidered as part of an integrated approach to intervention and prevention for disadvantaged families.

Effective home visitation programs should be well implemented and aligned with community challenges and strengths. A direct funding stream would create a coordinated infrastructure that can address the problems of vulnerable families.

This brief summarizes a longer report. The full report and references are available online at www.srcd.org under *Social Policy Report* on the Policy & Communications tab.

Policy Implications (continued)

With the aim of reconsidering home visitation, policymakers should:

- Create a unique and coordinated funding stream for home visitation services. Currently, support comes from many sources, including Title V Maternal and Child Health Services Block Grant, Temporary Assistance for Needy Families, and Medicaid Federal Financial Participation. Developing a direct funding stream would create the necessary coordination and infrastructure to address the educational and health needs of at-risk children and families.
- Develop an integrated database to allow states to survey the models implemented to increase coordination and accountability.
- Invest in programs that conduct rigorous evaluations using diverse methods to assess effectiveness and demonstrate improved quality; this is important because the most effective programs are those that are implemented well and consider the distinct characteristics of their communities.
- Consider the diversity in existing models and goals in addressing local needs. For example, home visitation may be well suited to children of immigrant families, many of whom don't participate in center-based early childhood programs.

What the Research Says

- Opinions on the effectiveness of home visitation programs are mixed. This is partly because research has looked at a variety of program models and goals, and used a variety of evaluation methods. Some studies have shown that the approach is effective for some populations but not others (for example, mothers benefit more than children, and Latino families more than non-Latinos). And some studies say the benefits are not strong, while others say it can improve child health and development, school readiness, and parenting.
- To provide effective services in communities, programs must be fully implemented as they are intended. If they have been tested, they must be implemented as they have been shown to be effective in research, with expected outcomes and evaluation tied to programs' goals and models.
- Although the effect of home visitation as part of larger programs has not been well studied, home visitation services are thought to be best when they are part of a comprehensive, integrated approach to services.

Facts at a Glance

- The field of home visitation serves between 400,000 and 500,000 children and their families in America yearly, reaching about 2 percent of all children under 6. Forty states have a statewide home visitation program.
- Home visitation as a service model began in Europe at the turn of the 20th century and today is widely accepted there. In many European countries, services are offered to all citizens regardless of income as part of a comprehensive approach to maternal and child health care.
- In the United States today, home visitation programs include the Parent Child Home Program, Parents as Teachers, and Home Instruction for Parents of Preschool Youngsters, as well as Healthy Start, Healthy Families America, Nurse Family Partnership, and Early Head Start.
- Although exact figures for federal support of home visitation interventions are not available, in 2005, less than 5 percent of Title I funding (or about \$637 million of the \$12.7 billion allocated) went to provide services for children under 4, including but not limited to home visitation programs.

This brief summarizes a longer *Social Policy Report* by Jennifer Astuto, Assistant Director of the Child and Family Policy Center in the Steinhardt School of Culture, Education, and Human Development at New York University (NYU), and LaRue Allen, Raymond and Rosalee Weiss Professor of Applied Psychology in the Steinhardt School of Culture, Education, and Human Development at NYU and Director of the Child and Family Policy Center.

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