



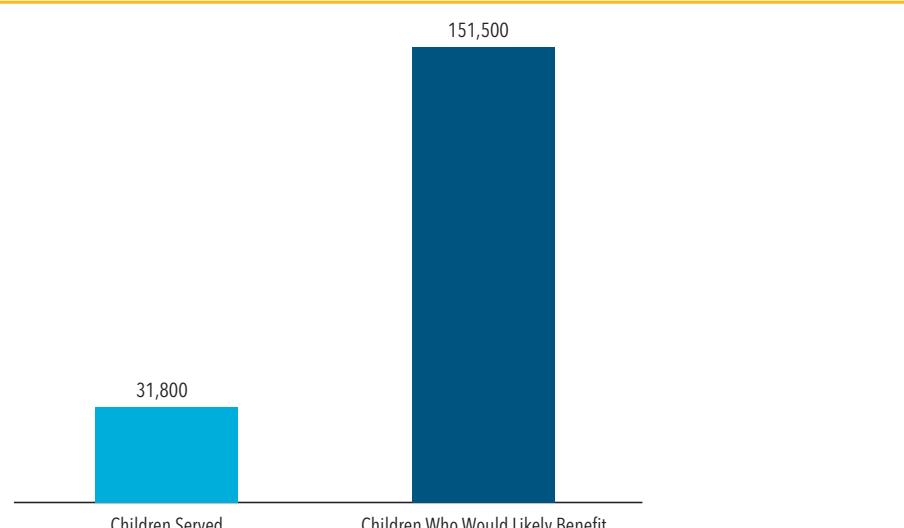
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## Home Visiting Can Improve Outcomes for Children, But Few Receive Services

The early childhood years are the foundation for lifelong well-being. Yet, despite the state's strong economic growth, about 1 in 10 of California's children are born without important resources strongly associated with child health and well-being, such as access to health care or economic resources.<sup>1</sup> Children with fewer "assets" are at higher risk for adverse experiences – such as abuse – that expose them to harmful stress.<sup>2</sup> Chronic exposure to stress, especially in the early years, undermines children's healthy development, with long-term health, behavioral, and academic consequences.<sup>3</sup>

Research indicates that early intervention tools like evidence-based home visiting can reduce or prevent the effects of adverse experiences for children.<sup>4</sup> Home visitors, who are often social workers or nurses, provide parenting education and other assistance to at-risk parents.<sup>5</sup> These services can boost children's and parents' well-being by enhancing child and maternal health, helping prevent child abuse, and improving child development.<sup>6</sup> However, the number of children in California who would most benefit from home visiting outweighs the current service levels. In the 2017-18 state fiscal year, 31,800 children benefitted from federally- and locally-funded evidence-based or evidence-informed

### In California, Fewer Children Receive Home Visiting Services Than Those Who Would Most Likely Benefit



Note: Estimated likely beneficiaries defined as children ages 0 to 2 born with 6 or fewer California Strong Start assets. Service levels are for state fiscal year 2017-18. It is not possible to ascertain the asset scores of children receiving services. Data do not include the CalWORKs Home Visiting Program.

Source: Budget Center analysis of data from First 5 California, the California Department of Public Health, and the California Strong Start Index.

home visiting, compared to the estimated 151,500 children ages 0 to 2 who would most likely benefit from home visiting services.<sup>7</sup>

Home visiting in California is largely funded and coordinated by local First 5 commissions, the California Home Visiting Program in the California Department of Public Health (CDPH), and – beginning January 2019 – the CalWORKs Home Visiting Program.<sup>8</sup> The 2019-20 budget also expanded support for home visiting by providing funding for services through CDPH, which represents the state's first financial investment in home visiting for non-CalWORKs families.

Without adequate resources, children are at higher risk to experience traumatic life events. This can jeopardize children's potential success, imposing significant costs on children, their families, and society. Recognizing this, California is investing in early interventions like home visiting in order to improve outcomes for children and their families. Yet, with home visiting programs out of reach for so many children who could benefit from them, policymakers should consider ways to continue to close the gap. Increasing state funding to expand home visiting is a step in the right direction. Additionally, state policymakers should also strengthen the infrastructure for home visiting by improving local service coordination and data collection, and building workforce capacity.

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<sup>1</sup> Email correspondence with Emily Putnam-Hornstein (USC Suzanne Dworak-Peck School of Social Work Children's Data Network) on April 30, 2019. Analysis is based on data from the California Strong Start Index. The index counts how many resources are present at birth and assigns a birth asset score from 0 to 12.

<sup>2</sup> Regan Foust, et al., *California Strong Start Index Documentation* (USC Suzanne Dworak-Peck School of Social Work Children's Data Network, no date), p. 34.

<sup>3</sup> Ross Thompson, "Stress and Child Development," *The Future of Children* 24:1 (2014), pp. 41-59.

<sup>4</sup> Lynn A. Karoly, Rebecca Kilburn, and Jill S. Cannon, *Proven Benefits of Early Childhood Interventions* (RAND Corporation: 2005).

<sup>5</sup> For example, parents who are at risk of problems such as substance abuse, unemployment, or family violence. See Charles Michalopoulos, et al., *The Mother and Infant Home Visiting Program Evaluation: Early Findings on the Maternal, Infant, and Early Childhood Home Visiting Program – A Report to Congress* (US Department of Health and Human Services: January 2015).

<sup>6</sup> US Department of Health and Human Services, *The Maternal, Infant, and Early Childhood Home Visiting Program: Partnering With Parents to Help Children Succeed* (no date), accessed from <https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/HomeVisiting/pdf/programbrief.pdf> on April 2, 2018.

<sup>7</sup> The estimated number of children who would most likely benefit from home visiting is based on statewide birth data from the California Department of Public Health (CDPH) and from data provided by Emily Putnam-Hornstein and Regan Foust (USC Suzanne Dworak-Peck School of Social Work Children's Data Network) on April 30, 2019 and May 9, 2019. This analysis defines children born with 6 or fewer California Strong Start assets as children most likely to benefit from home visiting services. Compared to other children in the state, this population experiences significantly higher rates of childhood adversities, such as a fatality or reports of abuse or neglect by age 5. Putnam-Hornstein provided the share of children who were born with 0 to 6 assets in 2016. This analysis assumes that share is constant in both 2015 and 2017. Data on the number of children receiving home visiting comes from the CDPH and from First 5 California and applies to the 2017-18 state fiscal year. It is not possible to ascertain the asset scores of children receiving home visiting services. For example, some children receiving services may have an asset score that is greater than 6. This analysis does not include the CalWORKs Home Visiting Program, which was implemented in January 2019.

<sup>8</sup> The California Home Visiting Program receives funding from federal grants and, as of the 2019-20 budget agreement, the state. First 5 supports both national evidence-based home visiting models and local models. The CalWORKs Home Visiting Program, which provides up to 24 months of home visiting for CalWORKs parents who are pregnant or parenting children under age 2, was introduced in the 2018-19 state budget and made permanent in the 2019-20 budget. It is currently supported by federal Temporary Assistance for Needy Families funds and the state General Fund. See Esi Hutchful, *Home Visiting is a Valuable Investment in California Families* (California Budget & Policy Center: May 2018), California Budget & Policy Center, *First Look: 2018-19 State Budget Invests in Reserves and an Array of Vital Services, Sets Course for Future Advances* (June 2018), and California Budget & Policy Center, *First Look: 2019-20 Budget Includes Balanced Investments, Leaves Opportunities to Improve the Economic Well-Being of More Californians* (July 2019).