A photograph of a young child being held by an adult outdoors. The child is wearing a striped shirt and dark pants, and the adult is wearing a striped shirt and blue pants. They are standing on a paved path with a green lawn and trees in the background.

Babies, Brains and Relationships:

Home visiting as a school readiness strategy

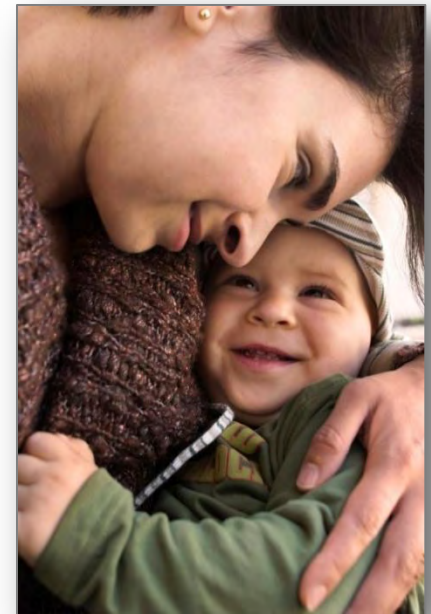
Senate Early Learning & K-12 Education Committee
March 23, 2011

Today

- What is home visiting?
- Baby brain power: Why early experiences matter
- The case for home visiting: What research shows
- Home visiting in Washington
- Q and A

What is home visiting?

- Pairs new and expectant families with home visitors:
 - Parenting information
 - Connections to community-based services
 - Support during pregnancy and throughout early childhood
- Delivers services primarily in the family's home—home visits may be paired with socialization activities such as group classes, parent outings
- Key strategy in the Early Learning Plan



Home visiting in action

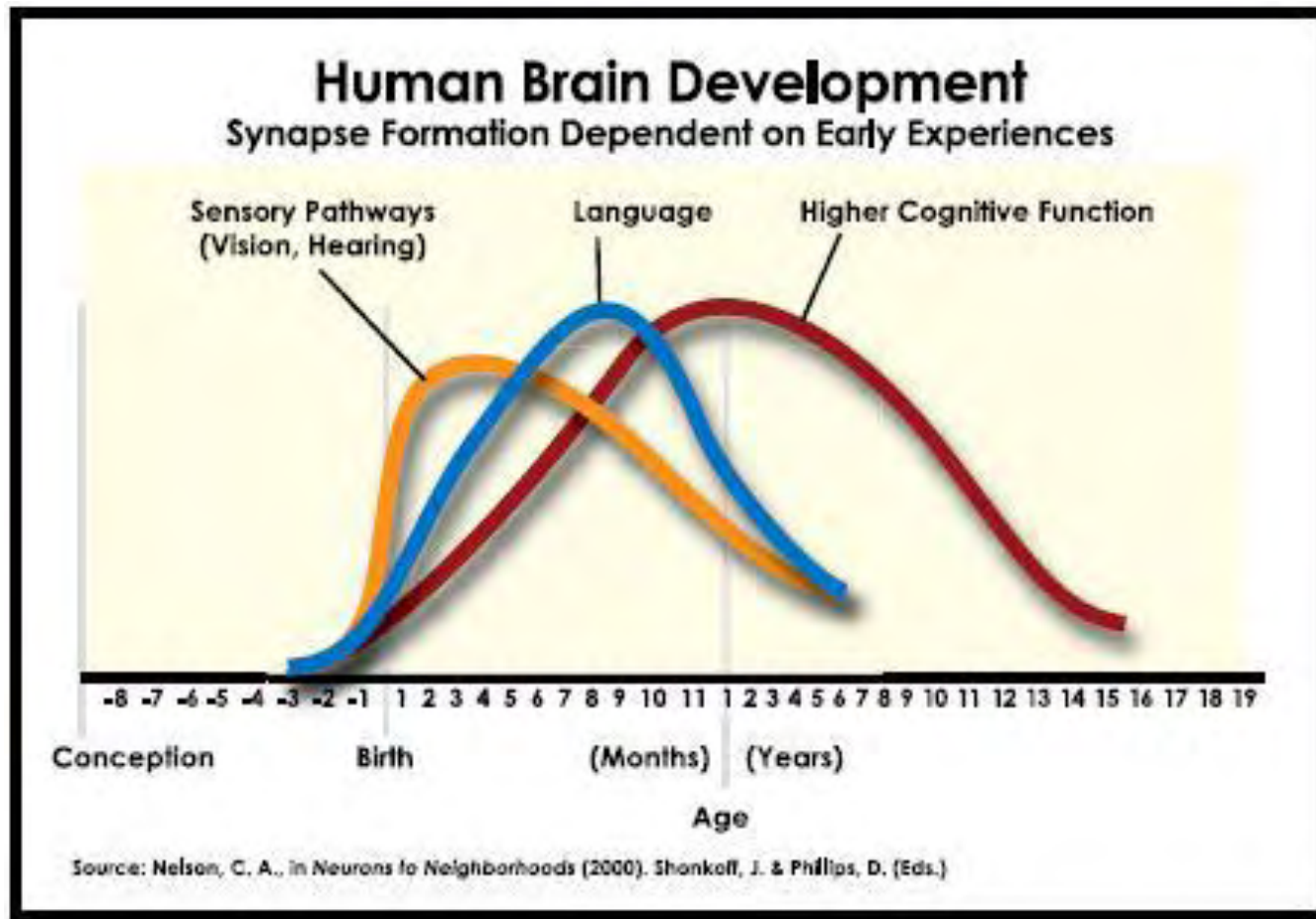
United Way of King County Parent-Child Home Program

Baby brain power



The brain grows faster in the first few years of life than at any other time.

Early experiences shape brain architecture



Why early experiences matter



- Prime brain building time is birth to age 3
 - *Early experiences LITERALLY shape the architecture of the brain*
- Early experiences take place in relationships
- “Early life experiences are built into our brains, for better or for worse.”

-Jack Shonkoff, Center on the Developing Child

How are babies' brains built?



- Nature and nurture
 - Genes
 - Relationships
 - Environment

The case for home visiting: What research shows



The case for home visiting

Research shows evidence-based home visiting has favorable impacts on:

- **School readiness**
Helped children build critical pre-literacy skills and improve achievement test scores
- **Reductions in child maltreatment**
Cut instances of child abuse and neglect almost in half
- **Positive parenting practices**
Increased feelings of competence and confidence of parents



Building solid foundations



- At age 6, children in Memphis who had participated in one evidence-based home visiting program had higher cognitive, vocabulary scores than the control group.
- At age 9, these children had higher GPAs, achievement test scores in math and reading in first through third grades than the control group.

(Olds, 2004)

Growing evidence in home visiting

- Research shows that home visiting promotes school readiness and helps prevent abuse and neglect
- Enhancing protective factors, such as:
 - Increases parent knowledge of child development
 - Increases understanding of how to develop healthy and nurturing relationships between parents and child

Paulsell, D., Avellar, S., Sama Martin, E., & Del Grosso, P. (2010). *Home Visiting Evidence of Effectiveness Review: Executive Summary*. Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Washington, DC.

Home visiting in Washington



The need for home visiting in Washington

Washington state is experiencing a huge demographic shift. This is most evident in our population of babies and toddlers:

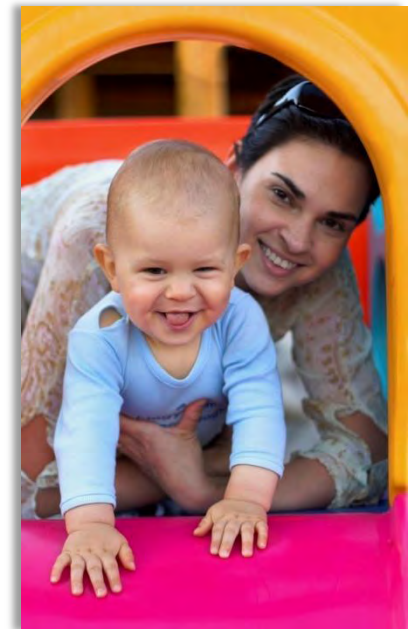
- Increase in number of babies born every year
- Increase in # of risk factors
- Increase in # of families who are low-income
- Increase in # of diverse families
- Increase in complex needs of families

Shifting demographics in Washington

- 348,000 children in WA **birth to age 3**, representing nearly one-quarter of the state's child population under age 18 (HSPC, 2009)
- 11,000 more babies born each year in Washington (since late 90s)
- Of these 348,000 children:
 - 35% are children of color, including 20% Latino, 6% Asian, 6% Black, and 2% American Indian/Alaska Native (HSPC, 2009)
 - 50% are born covered by Medicaid (DSHS, 2009)
 - More than 50% have mothers with a high school education or less
 - 35% live in or near poverty, a percentage that is greater than any other child age group (HSPC, 2009)
 - Many have complex needs (e.g., linguistic; racial; ethnic and cultural diversity; immigration status; and special learning/physical needs)

How are we responding in Washington?

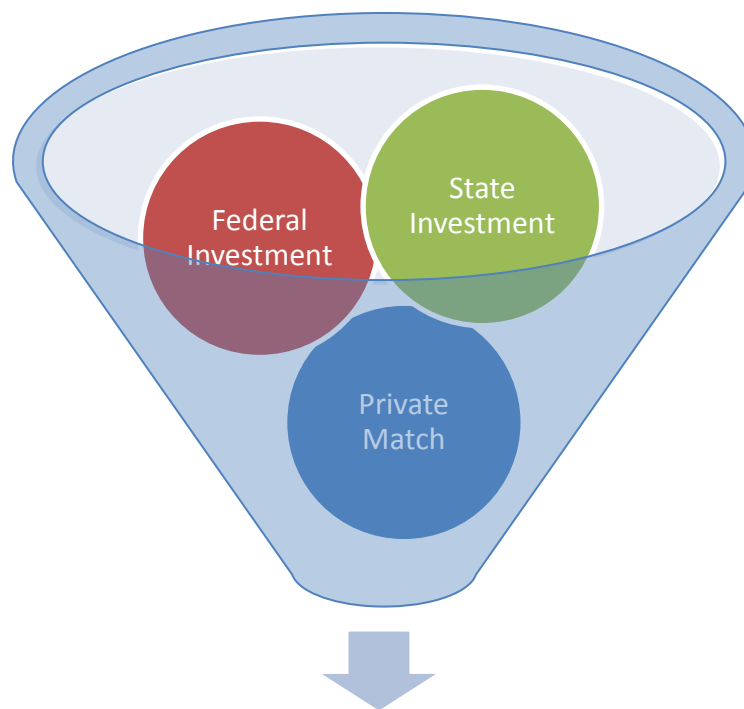
- Serving approximately 5,049 out of 43,000 eligible children with home visiting (11%)
- Funding a portfolio approach
 - Seven evidence-based models (Nurse Family Partnership, Parent-Child Home Program, Parents as Teachers, etc.)
 - Serving a range of needs in at-risk communities



Washington home visiting partners

- Federal, state, regional and local initiatives, including:
 - Council for Children & Families
 - Department of Health
 - Thrive by Five Washington
 - DEL
 - United Ways
 - School districts
 - Local health

Home visiting funding



**Home Visiting Investment in
Washington**

Questions

