

Investments in High-Quality Home Visiting is Key to a Strong Texas Economy

Texas's voluntary, high-quality home visiting programs can cultivate academic success and improve child outcomes and well-being



Acknowledgements

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Authors:

Tawana Bandy-Fattah, Research Associate Director
Kolby Monnig, Texas State Director

Contributors:

Sandra Bishop, Ph.D., Chief Research Officer
Tom Garrett, Director, Communications
Brittney Taylor-Ross
TexProtects, Prenatal to Three Policy Manager
Mariana Galloway, Art Director

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Summary

Preparing children to flourish in adulthood is vital to building and sustaining a thriving economy. Supporting parents during the prenatal and early childhood years is one of the most effective ways of putting children on a successful path. This is particularly important for parents who face compounding adversities—such as poverty, unemployment, teenage pregnancy, or single parenthood—as well as those who lack access to resources and models of positive parenting.

High-quality home-visiting programs have proven to be a powerful intervention in helping families to build strong foundations that lead to later life success, particularly for those who are economically disadvantaged.¹ These programs provide education and vital support to new parents as they adjust to the vast responsibilities of child-rearing. Importantly, they offer mentorship from a

trained educator, from pregnancy into the first few years of a child's life, providing tools that can guard against unhealthy parenting and child-rearing practices, as well as promote self-efficacy and self-advocacy. Home visiting also has societal benefits that extend well beyond the family. High-quality home-visiting programs strengthen the economy by promoting academic success, healthy behaviors, and economic independence. When children and families are functioning well, our state and our nation benefit.

High-quality home visiting priorities for a stronger Texas

Home visiting is a term for numerous types of programs whereby parents or families opt in to have trained professionals (e.g., nurses, social workers, child development specialists, or parent educators) visit their homes on a regular basis. Depending on

the program, participation can begin as early as pregnancy or during the first five years of a child's life. Home visits can focus on connecting pregnant women with prenatal care resources, promoting the concept of parents as the primary teachers, modeling healthy parent-child attachment, and coaching parents on how to cultivate home environments that foster healthy brain development. Home visiting also encompasses regular screenings to help parents identify possible health-related or developmental issues. Families are often connected to resources within the community that can benefit both parents and children. Ultimately, these programs are designed to provide parents with tools and resources that can foster short-term and long-term success for the family and child.

All federal and state funded home-visiting programs in Texas are consolidated and operate through a single agency, the Texas Department of Family and Protective Services, Prevention and Early Intervention. (DFPS-PEI). DFPS-PEI funds home visiting services through the five following programs, utilizing state and federal funding, including federal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) funds²:

- **Texas Home Visiting (THV):** THV is a program funded by MIECHV and state general revenue funds. The program offers regular home visits by early childhood and health professionals. The program specifically addresses the needs of expecting parents, parents and caregivers of prekindergarten children who need help getting school-ready, families raising multiple children, and/or those who have experienced familial setbacks. In 2019, THV served 24 counties.

“High quality home visiting will help strengthen Texas families for generations and maximize the potential benefit their children receive in early childhood services to build the workforce we need to keep Texas' economy strong.”



Katie Ferrier

Vice President Education &
Workforce Development
San Antonio Chamber of
Commerce

- **Texas Nurse-Family Partnership (TNFP):** TNFP is a program through which nurses regularly visit the homes of at-risk pregnant women or families with children under age 2, addressing issues related to health, self-sufficiency, parenting and stress management. Families start services with TNFP by their 28th week of pregnancy and can receive services until the child reaches two years of age. In 2019, 22 counties were served by TNFP.
- **Helping Through Intervention and Prevention (HIP):** HIP is a free, voluntary program that provides home visiting that includes extensive assessments, parent education, and basic needs support. The program specifically addresses families with a new child and a prior history of a

confirmed child maltreatment, fatality, or termination of parental rights; and former and current foster youth who are expecting and/or are new parents. In 2019, HIP served 30 counties.

- **Healthy Outcomes through Prevention and Early Support (HOPES)** offers parent education and support services in communities across the state to strengthen and promote protective factors for families of children ages 0 to 5, particularly, who are considered at-risk for abuse and neglect. In 2019, HOPES served 51 counties.
- **Military Families and Veterans Pilot Prevention Program (MFP):** MFP program supports military families and veterans' families through parenting education, counseling, home visiting, and support services. This program specifically addresses the needs of those who have experienced or who are at a high risk of family violence and/or abuse and neglect. In 2019, MFP served four counties.

In earlier years, Texas has also utilized other models, including: Early Head Start-Home Visiting (EHS), Home Instruction for Parents of Preschool Youngsters (HIPPPY), Parents as Teachers (PAT), Positive Parenting Program (Triple P), and Incredible Years.³

In Texas, there are approximately two-and-a-half million Texas families with children under 6.⁴ Research finds that about 413,000 families could benefit from home visiting.⁵ In Fiscal Year 2019, MIECHV-funded home-visiting programs served approximately 4,000 Texas families, and state-funded home-visiting programs served approximately 7,600 families.⁶ This means that less than five percent of families who could benefit from home visiting currently receive it. Of the families served in 2019, 61 percent of households had low



incomes; nine percent included pregnant teens; and about eight percent reported a history of child maltreatment.⁷

Cultivating academic success through home visiting

Children from disadvantaged backgrounds often experience higher rates of special education services, grade retention, and school drop out compared to those who are not disadvantaged⁸—potentially hampering future opportunities to excel in the workforce.⁹ Research finds that early childhood interventions provide a means by which children develop the skills necessary to be positive contributors to the labor force.¹⁰



Parents are children's first and most important teachers. Home visiting programs equip parents to provide quality early learning experiences during a critical period of brain development—setting children up for success in school. An evaluation of the Texas HIPPO program found that children whose parents participated in the program achieved higher math and reading scores than the national and district averages.¹¹ Similarly, a study of another high-quality program, Healthy Families America, found that participants were significantly more likely to participate in gifted programs, and less likely to drop out of high school, as compared with children not in the program.¹²

Home visiting can prevent early child health problems

In Texas, 34 percent of children are either obese or overweight, and nearly one million

children lack access to health care. Hispanic children are the most likely to be obese and uninsured.¹³ Consequently, these children are at greater risk for lifelong chronic health problems, such as obesity, high blood pressure, and heart disease. Considering the strong link between poor health and workforce instability,¹⁴ along with the increasing Hispanic population in Texas, preventing these health disparities in the early years is paramount for our state's future economy. Home visiting can play a role in breaking this cycle. For example, in a study of the Mind the Baby home visiting program, investigators followed young, Hispanic, first-time mothers who lived in medically underserved communities over a two-year period. Rates of obesity and overweightness were significantly lower among children whose families participated in the program, compared to non-participants.¹⁵

Improving financial stability through home visiting

In Texas, 19 percent of children live in poverty (more than 860,000).¹⁶ Children growing up in impoverished households are more likely to experience increased residential mobility, attend less well-funded schools, have an unemployed parent, and live in neighborhoods with fewer resources. The parents of these children have fewer resources at their disposal and, as a consequence, provide fewer cognitively-stimulating materials in the home, and make fewer investments in their children's education.¹⁷ These experiences can have a lasting effect, making it difficult for these children to escape poverty once they reach adulthood.¹⁸ Increasing families' capacity to achieve financial stability can help disrupt the cycle of intergenerational poverty. High-quality home visiting has been shown

to have a positive impact on family incomes. By helping parents set and achieve education and employment goals, home visiting programs can increase parents' earnings and reduce their reliance on public assistance. For example, mothers who participated in the Early Head Start home visiting program boosted their average annual earnings by \$3,600 following participation.¹⁹

Home visiting can reduce substance use and child welfare involvement

In Texas, nearly eight out of every 100 adults have a substance use disorder (SUD).²⁰ As a result, in high-risk Texas communities, between three and six percent of babies are born with signs of prenatal substance use exposure.²¹ While substance use does not always result in prenatal exposure, substance use is the leading contributor to children entering the Child Protective Services (CPS) system—contributing to two-

thirds of cases in Texas.²² Familial involvement with CPS, particularly if parental custody loss is a result, can have serious and long-lasting implications for the health and well-being of children and families.²³

High-quality home-visiting programs have been found to reduce parental substance use, and involvement with the child welfare system. An evaluation of the NFP program showed that participation resulted in fewer CPS reports and substantiations in home-visited groups compared to controls.²⁴ In another study of approximately 700 mothers and their children, mothers who received home visiting reported fewer depressive symptoms and were less likely to engage in substance use.²⁵ These findings are particularly important, as families dealing with substance abuse are more likely to experience disruption, and less likely to cultivate environments needed to put their children on a path towards success.

Conclusion

Home visiting is a key component to the future success of Texas. Despite significant improvements, only five percent of the 2021 budget was spent on prevention, with 87 percent spent on Child Protective Services.²⁶ Investing in these programs across our state helps to put our children and families on a strong path, unhampered by health and social barriers—increasing their potential to fully participate in building a thriving and prosperous state.

Endnotes

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1108 Lavaca Street / Suite 110 1A-139 / Austin, TX 78701 / 512.691.5064

