

Fostering Success through Evidence-Based Home Visiting Programs

Georgia's voluntary evidence-based home visiting programs can improve child and family well-being, increase public safety, and make our nation more secure



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<1%
of Georgia families
with children under
6 years utilized
available home
visiting services

The benefits of home visiting programs are well-researched, with evidence demonstrating that investing in these programs yields positive results for children, families, and our nation at large. These programs strengthen the economy by fostering families' economic independence and promoting school readiness and academic achievement. They may also improve public safety by helping to prevent child maltreatment and reduce substance misuse. Further, home visiting programs have implications for national security, through their impact on obesity and mental health, two of the major medical disqualifiers for military service. When parents take advantage of the resources available through voluntary home visiting, entire communities can benefit.

What is voluntary home visiting?

Home visiting is a term that encapsulates a variety of voluntary programs that employ trained professionals (e.g., nurses, social workers, or parent educators) to support pregnant mothers and new parents—through home visits—to promote infant and child health, foster educational development and school readiness, and help prevent child abuse and neglect. These programs also connect parents to resources within their community. Ultimately, these programs can help put families on the path to self-sufficiency.

The Georgia Home Visiting Program (GHVP) utilizes multiple home visiting programs that are considered evidence-based by federal standards. The four home



“ Home visiting programs strengthen the economy by fostering families’ economic independence and promoting school readiness and academic achievement.”

visiting programs that currently operate in Georgia¹ are as follows:

Early Head Start (EHS): Promotes healthy prenatal outcomes and supports infant and toddler development, while strengthening families.

Healthy Families Georgia (HFG): Promotes positive parenting and child well-being and prevents the abuse and neglect of children in Georgia through family focused and empathic support provided in the home.

Nurse-Family Partnership (NFP): Promotes healthy pregnancies for low-income, first-time mothers. Mothers are enrolled before their 28th week of pregnancy, with services continuing until the child reaches two years of age. Trained nurses promote mothers’ self-efficacy and personal growth and encourage parent-child attachment and healthy parenting choices.

Parents as Teachers (PAT): Focuses on enhancing parenting knowledge, attitudes, and behaviors, and promoting family well-being to positively impact children’s developmental trajectories.

In previous years, SafeCare Augmented®, another evidence-based home visiting program, was implemented in Georgia.²

The primary funding stream for the GHVP is the federal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program. In fiscal year (FY) 2022, the state received nearly \$7 million in MIECHV funding.³ Additional funding streams include the Title V Maternal and Child Health Services Block Grant, Healthy Start Initiative: Eliminating Disparities in Perinatal Health, and minimal state funding.⁴ Collectively, the GHVP served 3,035 families in FY 2020. This number, however, represents less than

one percent of the 594,100 Georgia families with children under 6 years old who could benefit from home visiting.⁵ When narrowed down to the highest-priority families, only 1,461 Georgia families (equivalent to only two percent) received services in FY 2020.⁶

The Economic Case for Home Visiting in Georgia

Improving financial stability through home visiting

Children growing up in impoverished households, including 19.5 percent of young children in Georgia,⁷ are more likely to experience increased residential mobility, attend less well-funded schools, have an unemployed parent, and live in neighborhoods with fewer resources. These experiences can have a lasting effect, making it difficult for these children to escape poverty once they reach adulthood.⁸ 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. For example, mothers who participated in the EHS home visiting program boosted their average annual earnings by \$3,600 following participation.⁹ Similarly, an NFP study found that the average participating family reduced their use of welfare benefits by 10 percent each year compared to the control group, which added up to \$14,500 in the decade following the program.¹⁰

Cultivating academic success through home visiting

Children develop foundational skills needed for the workforce in the first five years of life.¹¹ Children from disadvantaged backgrounds are more likely to experience special education placement, grade retention, and school drop out¹²—potentially hampering



“ Home visits to toddlers are more efficient than jail visits to 21-year-olds. Effective crime prevention calls for strong investments in young children.”



Joe Wirthman
Chief of Police, Jefferson, Georgia



future opportunities to excel in the workforce.¹³ Home visiting can help offset these challenges through early education.¹⁴ For example, participation in the PAT program resulted in higher scores in reading, math, and language at kindergarten entry and in later grades.¹⁵ Similarly, a study of HFA 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.¹⁶ In addition, some programs have found a positive return on investment (ROI). For example, NFP yields net economic benefits (benefits minus costs) of \$4,556 per family served.¹⁷

The Public Safety Case for Home Visiting in Georgia

Home visiting can prevent child maltreatment and child welfare involvement

In FY 2020, 17,618 Georgia children were served by the foster care system, and nearly 8,700 Georgia children experienced child maltreatment. Of all the child maltreatment cases, 78 percent of the perpetrators were parents, and the youngest children were the most likely to be maltreated.¹⁸ Child abuse and involvement with child welfare can have serious and long-lasting implications for the overall well-being of children, including later criminal activity.¹⁹ While most child maltreatment victims do not become criminals, experiencing neglect or abuse increases the risk of future involvement in crime. For example, neglected children are almost five times more likely to be arrested as juveniles, twice as likely to be arrested as an adult, and three times more likely to be arrested for a violent crime as those who did not experience neglect.²⁰

“Effective, early home visiting can curb several factors that negatively affect our national security. By investing today, we can have a healthier, more prosperous country tomorrow.”



Rear Admiral (Ret.)
Casey Coane
U.S. Navy

Evidence-based home visiting programs provide a solution to help combat both child maltreatment and child welfare involvement.²¹ The longest-running home visiting study followed NFP participants and demonstrated that, by age 15, children in NFP had half as many verified incidents of maltreatment as children in the control group who didn't participate.²² Another program, SafeCare Augmented®, resulted in improved use of non-violent discipline techniques among at-risk mothers, albeit short-term.²³ A recent assessment of the GHVP also found that 99 percent of participating Georgia families had no reports of child maltreatment.²⁴

Home visiting can help curb substance misuse

Having a substance use disorder is a major risk factor for child maltreatment, as it can negatively impact a parent's capacity to function as a nurturing caregiver and meet their children's fundamental needs.²⁵

According to the Georgia Department of Public Health, from 2019 to 2021, there was a 61 percent increase in overdose-related deaths and a 230 percent increase in fentanyl-involved overdose deaths in the state.²⁶ Parental substance abuse also heightens the risk of substance abuse problems and juvenile delinquency in adolescence and young adulthood.²⁷ Among adolescents (persons aged 10-19 years), overdose-related deaths increased 127 percent, and fentanyl-related deaths increased 800 percent.²⁸

Long-term follow-up studies have demonstrated the preventive impact of home visiting on substance use. For example, in an NFP study of families with low household income, mothers were found to have had less impairment from alcohol



and substance misuse.²⁹ Similarly, in an HFA study, participating mothers who received home visiting were less likely to engage in substance use.³⁰

The National Security Case for Home Visiting

Preventing early child health problems

In Georgia, 34 percent of children are either obese or overweight,³¹ and 50 percent of Georgia children do not exercise regularly.³² Nearly three-fourths of Georgia youth are ineligible for military service³³ and obesity is a major disqualifier. Preventing these health disparities in the early years is paramount for national security,³⁴ and home visiting can play a role: PAT participants improved consumption of fruits and vegetables, and

parents improved food preparation, compared to nonparticipants.³⁵

Home visiting can address mental health issues

The mental health of children is directly connected to parent's mental health.³⁶ In 2021, 44.3 percent of Georgia adults reported symptoms of anxiety or depression.³⁷ Similarly, 25 percent of children in Georgia have one or more emotional, behavioral, or developmental conditions.³⁸ A history of mental health disorder can disqualify future enlistment in the military.³⁹ Home visiting programs can

play an important role in screening for mental illness, providing mental health resources and referrals, and teaching coping mechanisms.⁴⁰ For example, in FY 2020, 80 percent of Georgia primary caregivers participating in GHVP were screened for depression, and 29 percent of those referred due to a positive screen for depression received mental health services.⁴¹ In an HFA study of approximately 700 mothers and their children, mothers who received home visiting services and referral information reported fewer depressive symptoms.⁴²

Conclusion

Home visiting is a key component to the future success of Georgia. Despite the commitment to the implementation of evidence-based, voluntary home visiting models, the lion's share of funding for home visiting is through the federal MIECHV program. Greater state investments in these programs would help 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. Increased resources would help more families build foundations for future success and help reduce the lifelong impact of early childhood adversity. Ultimately, home visiting programs create stronger families and strengthen the fabric of our communities, which increases public safety, national security, and reduces burdens on taxpayers throughout Georgia.

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