

Office of Early Childhood Home Visiting Program



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Purpose

Home Visiting professionals provide visits and services to pregnant women and young families who would like:

- **Support with parenting**
- **Information about child development**
- **Connections to community resources**
- **Information on breastfeeding, toilet training, nutrition, home safety, and other education.**

The Home Visiting Program currently serves 600 vulnerable families each year. With 23,000 children under age 5 living in poverty, Utah is only serving a fraction of the need.

Quick facts on home visiting participants in 2022:

- Of adult caregivers:
 - 78% were female
 - 70% were between the ages of 25-44
 - 61% have a high school diploma or less
- 80% of children were 2 years old or younger
- Families speak many languages, including English, Spanish, Japanese, Nepali, Russian, and Somali

Benefits of Home Visiting Programs

Improvements in positive parenting practices

- Increase parental confidence to create more developmentally stimulating home environments
- Decrease the use of physical punishment and yelling
- Reduce substantiated reports of child abuse and neglect
- Reduced recurrence of maltreatment



Benefits of Home Visiting Programs

Improvements in child and maternal health

- Reduction in low-birth weight infants
- Positive impacts on breastfeeding and child immunization rates
- Improvements in parental mental health and decrease in parenting stress



Benefits of Home Visiting Programs

A strong focus on child development and school readiness

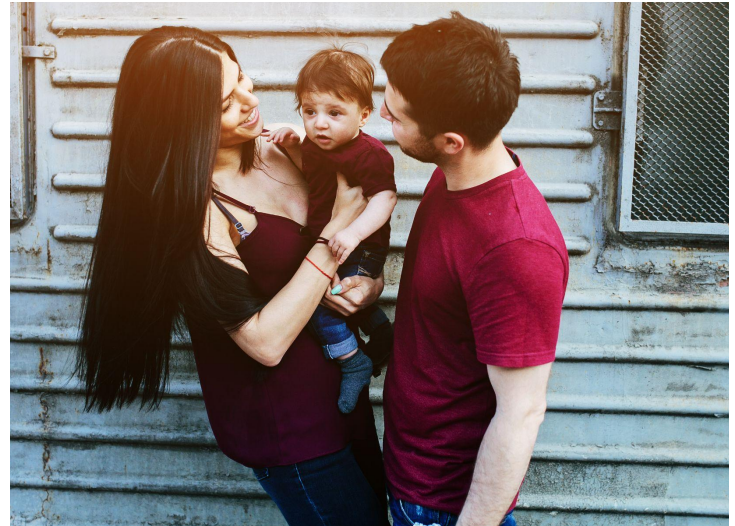
- Positive impacts on children's cognitive development, behavior, and school performance



Benefits of Home Visiting Programs

Supports for family economic self-sufficiency

- Parents are more likely to work or be enrolled in education or vocational training
- Parents are more likely to obtain jobs with higher wages during or following enrollment



What

Utah is the best state for families. We recognize that what happens in a child's young life affects their future. We also recognize that **upstream, proactive approaches to supporting children and families are much less expensive than paying millions of dollars later** in social services when children don't have the support they need.

Why

As a state, we have been able to provide traditional, long-term evidence-based home visits for 600 vulnerable families each year. **For every dollar we spend on this program, we can save up to \$5.70 in costs later on.**

How

Our goal and aspiration is to **serve** more families, both in **rural and urban communities**. By releasing a Request For Proposals (RFP), we plan to collect and implement the best ideas from communities and stakeholders across the state to **expand these critical services** to as many families as possible over the next three years.

RFP Priorities

1. Must track **five** of the 10 **recommended outcomes**. (See next slide.)
2. Must pilot a program in at least **one urban county and one rural county**.
3. Preference given to a group with a **variety of stakeholders** who can help **leverage existing home visiting programs, resources, private dollars, and innovative ideas** to serve the maximum number of families in the best way possible.
4. Must **triage families to determine the level of service** needed and have several levels of home visiting to meet their needs and maximize resources.
5. RFP applicants to **write a detailed plan** on how to achieve these priorities.
6. \$5 million per year for three years is available for this pilot.

Proposed Outcomes (Baseline data collected in year 1)

- 1. Caregiver Depression or Postpartum Depression Screening:** Increase the percent of caregivers receiving a screening;
- 2. Depression Service Referrals:** Increase the percent of referrals for those with an identified need;
- 3. Well Child Visits:** Increase the percent of children who receive a pediatric wellness visit based on the American Academy of Pediatrics criteria in the previous year;
- 4. Emergency Room Visits:** Decrease the rate nonfatal injury-related visits among enrolled children to the Emergency Department;
- 5. Early Language and Literacy Activities:** Increase the percent of caregivers who report reading, telling stories, and/or singing songs with their child every day;
- 6. Developmental Screening:** Increase the percent of children who receive an on-time Ages and Stages-3 Questionnaire to assess delays;
- 7. Developmental Screening Referrals:** Provide referrals to Baby Watch for those with an identified need;
- 8. Behavioral Concerns:** Decrease the percent of visits where primary caregivers report having concerns about their child's development, behavior, or learning;
- 9. Intimate Partner Violence Screening:** Increase the number of screenings for all caregivers;
- 10. Intimate Partner Violence Service Referrals:** Increase the number of referrals for those with an identified need.

Proposed Budget

SOURCE	FY 23 ONE-TIME	FY 24 ONE-TIME	FY 24 ONGOING	TOTAL REQUEST
General Fund, Income Tax Fund or Uniform School Fund	\$0	\$15,000,000	\$988,000	\$15,988,000
OTHER	\$0	\$0	\$0	\$0
TOTAL	\$0	\$15,000,000	\$988,000	\$15,988,000



Questions?

Thank You!
