



Home Visiting Saves Money, Prevents Child Abuse, Helps Children Learn and Strengthens Families

New York State is a leader for home visiting in the U.S. Our programs demonstrate documented outcomes—increasing children’s safety, health and learning, as well as promoting families’ economic stability—and cost savings in the millions. In fact, for every \$1 spent on home visiting, there is a \$5.70 return on investment.¹

It has taken us nearly 20 years to build this system of home visiting supports and services, yet we still serve only a small percentage of those who would benefit. We must preserve the infrastructure (including research, training, and central administration) and continue to invest in the expansion of proven programs. Ideally, someday we will have a universal system of prenatal/postpartum care and home visitation.

Invest Today ... Reduce Costs Tomorrow

Average annual cost per family for home visiting in New York:
\$4,600- \$5,800²

Annual federal, state, and local expenditures on child welfare services in New York State:
About \$2.7 billion³

Annual costs associated with low birth weight infants born in New York:
\$241 million⁴

Average total cost to support one child in special education:
\$210,000⁵

Average annual cost for one child in foster care:
\$45,000⁶

Reduce Child Abuse and Neglect and Need for Child Welfare Services

- Decreases mothers' use of serious physical abuse and increases non-violent discipline methods.⁷
- Decreases confirmed child abuse cases for young first time mothers who start home visiting prenatally by about 50%.^{8,9}
- Decreases visits to the emergency room for accidents and poisonings by 56% and health-care encounters for injuries and ingestions by 39% in the first two years of life.¹⁰

Improve Birth Outcomes, Improving Children's Health and Development

- Reduces low birth weight deliveries by almost 50%.¹¹
- Decreases closely spaced pregnancies; 82% of mothers had no subsequent pregnancies at 18 months postpartum (vs. 73% nationwide).¹²
- Increases screening and identification early on for issues including developmental delays, vision and hearing problems, physical delays/health problems and social-emotional/mental health problems.¹³
- Reduces use of cigarettes, alcohol or marijuana, as well as incidents of depression and anxiety, among pre-teens.¹⁴

Promotes School Readiness and Learning

- Promotes success at school; children less likely to receive special education services or report skipping school and more likely to participate in a gifted program.¹⁵
- Reduces language delays among toddlers by 50%¹⁶ and improves reading and math test scores.¹⁷
- Increases high school graduation rates by 20-30%.¹⁸

Improve Economic Stability and Self-Sufficiency

- Increases young mothers' completion rates for a high school degree or GED.^{19,20}

- Reduces families' need for Temporary Assistance for Needy Families (TANF), increases enrollment in job training and education, and increases participation in the workforce.^{21,22}
- Increases fathers' involvement in their children's lives.²³
- Increases earnings, on average, more than \$14,250 per mother over a 5-year period.²⁴
- Increases state residents' earnings by 5.66% by increasing the high school graduation rate.²⁵ Increases lifetime earnings by an estimated \$600,000 to \$1 million.²⁶

Improves Public Safety

- Decreases arrests (61%) and convictions (72%) of mothers when their first child reaches age 15.²⁷
- Reduces arrests, convictions and adjudication as PINS (persons in need of supervision) among teenagers for incorrigible behavior.²⁸



Endnotes

- ¹ Karoly, L., Kilburn, M., Cannon, J.; *Early Childhood Interventions: Proven Results, Future Promise*; RAND Corporation; 2005.
- ² Prevent Child Abuse New York; 2011.
- ³ New York State Office of Children and Family Services; *The State of Child Welfare in New York: Shaping Things to Come*; 2010. http://www.ocfs.state.ny.us/main/ten_for_2010.asp
- ⁴ Medicaid birth rates and associated costs from 2007 State-wide Planning and Research Cooperative System (SPARCS), retrieved June 2010.
- ⁵ Hevesi, Alan G.; *Building foundations: Supporting parental involvement in the child's first years*; City of New York Office of the Comptroller; 2001.
- ⁶ New York State Citizen Review Panels for Child Protective Services; *2008 Annual Report and Recommendations*. <http://www.citizenreviewpanelsny.org/annual-report/>
- ⁷ Dumont, et al; *Effects of Healthy Families New York on Maternal Behaviors: Observational Assessments of Positive and Negative Parenting*. July, 2008
- ⁸ Olds et al; Reanalysis of Kitzman et al; Journal of the American Medical Association; 1997 Aug 27; 278(8):637-43.
- ⁹ Dumont, et al; *Final Report: A Randomized Trial of Healthy Families New York: Does Home Visiting Prevent Child Maltreatment*; NIJ Grant 2006-MU-MU-0002; October 2010.
- ¹⁰ Olds et al; *Preventing child abuse and neglect: a randomized trial of nurse home visitation*; Pediatrics; 1986 Jul; 78(1):65-78. Reanalysis of Kitzman et al; Journal of the American Medical Association; 1997 Aug 27; 278(8):644-52. See also Memphis Year 9 results, citation #23, finding that nurse-visited children as a trend were less likely to die from birth through age 9, an effect accounted for by deaths due to potentially preventable causes, such as preterm delivery, Sudden Infant Death Syndrome, and injuries.
- ¹¹ Lee et al; *Reducing low birth weight through home visitation: a randomized controlled trial*; American Journal of Preventive Medicine; 36, 154-60.
- ¹² Nurse-Family Partnership Efforts-to-Outcomes system; data as of 3/31/11 and CDC Pediatric and Nutrition Surveillance System; 2008.
- ¹³ Parents as Teachers National Center; 2008.
- ¹⁴ 67% reduction (smoking, drinking, drugs) and 28% reduction (depression/anxiety). Kitzman et al; *Enduring effects of prenatal and infancy home visiting by nurses on children: Follow-up of a randomized trial among children at age 12 years*; Archives of Pediatrics and Adolescent Medicine; May 2010; 164(5):412-418.
- ¹⁵ Dumont, et al; *Final Report: A Randomized Trial of Healthy Families New York: Does Home Visiting Prevent Child Maltreatment*; NIJ Grant 2006-MU-MU-0002; October 2010.
- ¹⁶ Olds et al; *Home visiting by paraprofessionals and by nurses: a randomized, controlled trial*; Pediatrics; 2002 Sep; 110(3):486-96.
- ¹⁷ Kitzman et al; *Enduring effects of prenatal and infancy home visiting by nurses on children: Age-12 follow-up of a randomized trial*; Archives of Pediatric and Adolescent Medicine; 2010 May; 164(5):412-418.
- ¹⁸ Levenstein, et al; *Long-term impact of a verbal interaction program for at-risk toddlers: An exploratory study of high-school outcomes in a replication of the Mother-Child Home Program*; Journal of Applied Developmental Psychology; 1998.
- ¹⁹ Healthy Families New York Home Visiting Quarterly Report, New York State, prepared by Center for Human Services Research, University at Albany. Data as of March 31, 2010.
- ²⁰ Nurse-Family Partnership Efforts-to-Outcomes system; data as of 3/31/11 and NYC Department of Education, 2010: [Rough estimate of rate of high school completion among teen mothers]. This is a special data point analysis conducted by the NYC Department of Health and Mental Hygiene.
- ²¹ Healthy Families New York Home Visiting Quarterly Report, op cit.
- ²² Nurse-Family Partnership Efforts-to-Outcomes system; data as of 03/31/11. Olds et al; *Long-term effects of home visitation on maternal life course and child abuse and neglect. Fifteen year follow-up of a randomized trial*; Journal of the American Medical Association; 1997 Aug 27; 278(8):637-43.
- ²³ National Survey of Family Growth; 2006. This is a special data analysis by the NYC Department of Health and Mental Hygiene.
- ²⁴ Savings continue to accrue thereafter from additional tax revenue and reduced spending in TANF, Medicaid, Food Stamps, and child abuse, and eventually in additional reduced spending associated with criminal justice. Miller, T.; *Draft, Cost Savings of Nurse-Family Partnership in New York*; Pacific Institute for Research and Evaluation; January 2011. This figure is based on New York cost data and effectiveness data from four randomized trials.
- ²⁵ Bartik, Timothy J.; *The Economic Development Effects of Early Childhood Programs*; Partnership for America's Economic Success; 2008.
- ²⁶ Hevesi, Alan G.; *Building foundations: Supporting parental involvement in the child's first years*; City of New York Office of the Comptroller; 2001.
- ²⁷ Reanalysis Olds et al. Journal of the American Medical Association 1997 Aug 27; 278(8):637-43.
- ²⁸ Reanalysis of Olds et al. Journal of the American Medical Association 1998 Oct 14; 280(14):1238-44 and Eckenrode et al; *Long-term effects of prenatal and infancy nurse home visitation on the life course of youths 19-Year follow-up of a randomized trial*; Archives of Pediatrics and Adolescent Medicine; January 2010; 164(1):9-15.

Learn more about home visiting programs in New York State:

Healthy Families New York (HFNY) research may be found at
http://www.healthyfamiliesnewyork.org/research_reports_papers.cfm

Nurse-Family Partnership (NFP) research may be found at
<http://www.nursefamilypartnership.org/proven-results>

Parent-Child Home Program (PCHP) research may be found at
<http://www.parent-child.org/proven-outcomes-research-summaries.html>

Parents as Teachers (PAT) research may be found at www.parentsasteacher.org



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