
Best Practice Fact Sheet – Strengthening Families

HEALTHY FAMILIES – Florida

Program

Description:

Prevent Child Abuse (PCA) America started a national program in 1992 called Healthy Families America to support parents across the country in providing a healthy start for their children from prenatal to preschool. Healthy Families Florida (HFF) is part of the Healthy Families America program.

Healthy Families Florida (HFF) was started in 1998 and it is in operation across the state. Counties decide whether to offer it to everyone or target it to high-risk zip codes. Family assessment workers and home visitors are trained and certified by HFF to work with participants. Home visits are done weekly for at least six months. The visits later change to bi-weekly, monthly, then quarterly as households progress through HFF to establish a stable and nurturing home.

Target Population: Families with preschool age children or pregnant women identified as “at risk” using a standardized assessment tool.

Goals: Help expectant and new parents get their children off to a healthy start by preventing child abuse and neglect, enhancing child health and development outcomes, and promoting positive parenting.

Caseload Data: In fiscal year 2009-2010: 12,099 families were served including 20,919 children. Home visitors carry a caseload of no more than 25 cases per person and no more than 15 cases of Level 1 (most intensive level of service). Currently, 90% of all the families invited to participate in the program in Florida accept services.

Cost: The Florida state legislature gave \$10 million and local contributions added another \$406,164 to start 24 community-based HFF programs in 1998. The legislature allotted over \$28 million in the current annual budget, with local contributions totaling \$7.7 million in cash and \$3 million in-kind for 37 projects. The legislature requires a 25% match from local partners in cash or in-kind services for this program.

Evidence: An independent five-year evaluation conducted by Williams, Stearns, and Associates

Assessment: All Healthy Family Florida (HFF) sites use a standardized tool mandated by the state legislature and developed by HFF to determine risk of child abuse and neglect. It identifies a combination of factors including: social isolation, substance use, family violence, maternal mental health, family history of abuse, and limited knowledge of parenting skills. Screening and assessment is conducted by a HFF family assessment worker. Family assessment workers must have a bachelor’s degree or higher.

Most other Healthy Families America sites, a national program uses a standardized Kemp assessment.*

Operating in

Washington:

No, but there is a Healthy Families America primary contact in this state: Christine Cairns, P.O. Box 255, Manchester, Washington 98353, 360-871-6683, bobandchriscairns@wavecable.com. A primary contact is someone who is knowledgeable about Healthy Families America and is willing to serve as a communications point person between the national office and the local community.

Services overview:

- Families are referred to HFF in a variety of ways including: prenatal risk screen (with informed family consent), medical providers, churches and other community based organizations, family and friends participating in Healthy Families, and self referral.
- HFF has a training institute with trainers that are certified through Healthy Families America. All staff are trained by these certified trainers on required core trainings.
- Because Florida has its own assessment tool, a family assessment worker is trained specifically in that tool in addition to incorporating the requirements of Healthy Families America core training.
- Home visitors (also called “family support workers”) are chosen on their ability to establish trusting relationships with participating families.
- In addition to a diploma, GED or a degree, and the standardized core training, home visitors also receive the following training: 1) four days of “primary” training on supporting healthy child development, 2) positive parent-child relationships, 3) improved parental problem-solving skills, 5) family support systems, 6) about 80 hours of wraparound training (e.g., local challenges and resources) during their first six months, and 7) training in cultural competency, substance abuse, child abuse reporting, domestic-violence, drug exposed infants, and available services in their community.
- Services follow a detailed curriculum that uses a strength-based approach to introduce topics intended to support parent-child relationships, including basic care, cues and communication, social and emotional development, play and stimulation, and brain development. Additionally, home visitors teach problem-solving skills, conduct screening for developmental delays, provide social support, and make referrals to other family support services as needed.

Eligibility:

- Healthy Families services begin during pregnancy or within three months of a baby’s birth.
- Since Healthy Families is a voluntary prevention program, services are not offered to families who are in the child protective system at the time of the assessment.
- Although there is no means tested eligibility, 88.6% of participants were TANF eligible. According to HFF Executive Director Carol McNally, many participants are TANF and all are at or below FPL of 200%. Family must have multiple risks as determined by initial assessment.

Findings:

An independent five-year evaluation conducted by Williams, Stearns, and Associates concluded that HFF has a significant impact on preventing child abuse and neglect in Florida’s high risk families.

- 58% less abuse and neglect than in families who received little or no Healthy Families Services
- 92% of mothers participating in Healthy Families Florida did not have a subsequent pregnancy within two years
- 81% of participants who completed the program improved their education level, received job training or became gainfully employed while enrolled in the program

Implications for Policymakers and Program Developers to Consider:

- Child development research supports the demand for prevention and early-intervention programs explaining that early childhood experiences create the foundation for later learning, behavior and health outcomes.

- HHF home visitors ensure that families have a medical provider; share information on child development processes and work with parents on caring for children as babies, toddlers, and beyond; help parents to recognize the child's needs and to obtain appropriate resources; assist families in following through with recommended immunization schedules; help families to feel empowered; and link families with community resources for additional services (e.g., job placement, child care providers, financial services, food and housing assistance programs, family support centers, substance abuse treatment programs, domestic violence shelters, etc.).

Resources:

Healthy Families America programs recommended by staff from DSHS/RDA, and, Administration for Children and Families (ACF), U.S. Department of Health and Human Services. Healthy Families Florida was determined to be the best model of Health Families America programs.

Information for fact sheet came from Healthy Families America and Health Families Florida websites and conversations with Juanita Arnold, Deputy Director of Healthy Families Florida (850-488-1752 ext 129); jarnold@ounce.org and Carol McNally, Director of Health Families Florida (850-488-1752 ext 129); cmcnally@ounce.org;

Other sources:

www.amchp.org; www.acf.hhs.gov; www.dcf.state.fl.us; www.developingchild.harvard.edu

Literature reviews and meta-analyses:

Child Trends, *What Works for Home Visiting Programs*, 7/27/2010* www.childtrends.org;
California Evidence-Based Clearinghouse for Child Welfare, www.cebc4cw.org/search/topical-area/18

Sweet, M.A. and Applebaum, M.I. *Home Visiting Best Practices: A Review of the Literature*, May 2007 - www.birthing-beyond.com

Deanna Gomby *Home Visitation in 2005: Outcomes for Children and Parents* – www.ced.org/projects/kids.shtml/#new

Kimberly S. Howard and Jeanne Brooks-Gunn - "The Future of Children" Journal Issue: Preventing Child Maltreatment Volume 19 Number 2 Fall 2009
<http://futureofchildren.org/futureofchildren/publications/journals/article/index.xml?journalid=71&articleid=514>

Congressional Research Service report, *Home Visitation for Families with Young Children* by Karen E. Lynch & Emilie Stoltzfus, 10/23/2009 www.preventchildabusesb.org/CRSHomeVisitReportOct2009.pdf

*Also called the "Essentials of NEPSY-II Assessment." It is widely used by school psychologists, neuropsychologists, and research psychologists to assess children, ages three to sixteen, with neurological disorders and developmental disabilities and to develop effective intervention strategies. It must be administered, scored and interpreted by trained professionals.