

Strengthening Investments in Voluntary Home Visiting Can Help Improve Public Safety and Build the Future Workforce in Idaho, and Bolster National Security

Voluntary, evidence-based home visiting programs provide vital support for vulnerable families, in-person and virtually. Implemented by trained professionals, these programs offer education and support and coordinate services from pregnancy into the early years of a child's life. These early investments can reduce costly future problems. The Idaho Department of Health & Welfare receives funds from the federal, Maternal, Infant and Early Childhood Home Visiting program (MIECHV), to implement home visiting services.¹ Idaho's MIECHV-funded models include: Nurse-Family Partnership (NFP) and Parents as Teachers (PAT). In fiscal year (FY) 2021, the state received \$2.9 million in MIECHV funding.²

Of approximately 100,000 Idaho families with young children, there are over 30,000 highest-priority families who could benefit from home visiting.³ However, due to limited federal funds, only 537 Idaho families (equivalent to about four percent of the highest priority families) received services from the MIECHV program in FY 2020.⁴ Instability in the home visiting workforce—due to poor compensation—is another substantial barrier that can limit reach in Idaho.⁵

The Economic Case for Home Visiting

Children develop foundational skills needed for the workforce in the first five years of life.⁶ Children living in poverty, including 13 percent of young children in Idaho,⁷ are more likely to reside in homes lacking cognitive stimulation. Home visiting can help improve cognitive skills. A PAT study found that the school readiness scores of participants from households with low incomes were equivalent to children from affluent homes. In addition, some programs have a positive return on investment. For example, NFP yields net economic benefits (benefits minus costs) of \$4,556 per family served.⁸

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The Public Safety Case for Home Visiting

In 2022, there were over 1,900 substantiated child abuse cases in Idaho.⁹ The association between child abuse and crime is significant.¹⁰ Home visiting programs provide a solution to help combat child maltreatment.¹¹ An evaluation of the NFP program showed that participation resulted in fewer child abuse and neglect cases among participants compared to non-participants.¹²

The National Security Case for Home Visiting

In Idaho, 29 percent of children are either obese or overweight,¹³ and 46 percent do not exercise regularly.¹⁴ Nearly three-fourths of Idaho youth are ineligible for military service¹⁵ and obesity is a major disqualifier. Preventing these health disparities in the early years is paramount for national security,¹⁶ and home visiting can play a role: PAT participants improved consumption of fruits and vegetables, and parents improved food preparation, compared to non-participants.¹⁷



In sum, voluntary, evidence-based home visiting programs can play a significant role in improving outcomes for Idaho parents and children—building the future workforce, preventing crime, and bolstering national security. Idaho members of Congress must prioritize and strengthen MIECHV. Without a renewed commitment that includes increased funding, virtual delivery, and improvements in workforce compensation, we run the risk of reversing gains and suspending future advancement, to the detriment of vulnerable Idaho families and the nation.

Council for a Strong America is a national, bipartisan nonprofit that unites membership organizations, including law enforcement leaders, retired admirals and generals, and business executives, that promote solutions ensuring that our next generation of Americans will be successful, productive members of society.

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Endnotes

- 1** Idaho Department of Health and Welfare. (2022). Home visiting program for Maternal, Infant and Early Childhood Home Visits. <https://healthandwelfare.idaho.gov/services-programs/children-families/about-home-visiting>
- 2** Health Resources and Services Administration. (2022). FY 2021 Maternal, Infant, and Early Childhood Home Visiting awards. <https://mchb.hrsa.gov/fy-2021-maternal-infant-early-childhood-home-visiting-awards>
- 3** Those with two or more priority criteria (i.e. infant below 12 months; income below poverty threshold; under age 21; single; less than a high school diploma). National Home Visiting Resource Center. (2021). 2021 Home visiting yearbook. Who could benefit? Priority families. <https://nhvrc.org/yearbook/2021-yearbook/who-could-benefit/priority-families/>
- 4** U.S. Department of Health and Human Services, Health Services & Resources Administration (2021, July). Maternal, Infant, and Early Childhood Home Visiting Program. <https://mchb.hrsa.gov/sites/default/files/mchb/about-us/program-brief.pdf>.
- 5** Alitz, P. J., Geary, S., Birriel, P. C., et al. (2018). Work-related stressors among maternal, infant, and early childhood home visiting (MIECHV) home visitors: A qualitative study. *Maternal and Child Health Journal*, 22(1), 62–69. <https://pubmed.ncbi.nlm.nih.gov/29855835/>
- 6** Heckman, J. (2008). The case for disadvantaged children. CESifo DICE Report, 6(2), 3-8. https://www.researchgate.net/publication/227349437_The_Case_for_Investing_in_Disadvantaged_Young_Children
- 7** Kids Count. (2019). Children in poverty by age group in Idaho. <https://datacenter.kidscount.org/>
- 8** Washington State Institute for Public Policy. (2020, February 26). Washington State Institute for Public Policy benefit-cost results. Nurse Family Partnership. <http://wsippweb-prod.us-west-2.elasticbeanstalk.com/BenefitCost/ProgramPdf/35/Nurse-Family-Partnership>
- 9** Child Welfare League of America. (2022). Idaho's children 2022. <https://www.cwla.org/wp-content/uploads/2022/04/Idaho-Fact-Sheet-2022.pdf>
- 10** English, D.J., Wisdom, C.S., & Widom, C.B. (2002). Childhood victimization and delinquency, adult criminality, and violent criminal behavior: A replication and extension. <https://www.ojp.gov/pdffiles1/nij/grants/192291.pdf>
- 11** Nurse-Family Partnership manual. http://community.nursefamilypartnership.org/comnfp/media/large_files/DataCollection-Manual-October-2012-Final.pdf ; Parents as Teachers technical brief. https://static1.squarespace.com/static/56be46a6b6aa60dbb45e41a5/t/58239059197aea06e0b46520/1478725721563/TA_Brief_9_Protocols_April_2016.pdf
- 12** Olds, D.L., Eckenrode, J., Henderson, C.R., et al. (1998). Long-term effects of nurse home visitation on children's criminal and antisocial behavior: 15-Year Follow-up of a randomized controlled trial. *JAMA*, 280(14), 1238-1244. <https://www.researchgate.net/journal/JAMA-The-Journal-of-the-American-Medical-Association-1538-3598>.
- 13** Kids Count. (2022). Children and teens overweight or obese by gender in Idaho. <https://datacenter.kidscount.org/>
- 14** Kids Count. (2022). Children and teens not exercising regularly in Idaho. <https://datacenter.kidscount.org/>
- 15** Mission: Readiness (2018, February 21). MAP: Many young Americans are ineligible to serve in the military. <https://www.strongnation.org/articles/414-map-many-young-americans-are-ineligible-to-serve-in-the-military>
- 16** Mission: Readiness. (2018). Unhealthy and unprepared. <https://www.strongnation.org/articles/737-unhealthy-and-unprepared>.
- 17** Haire-Joshu, D., Elliott, M.B., Caito, N.M., Hessler, K., Nanney, M.S., Hale, N., Boehmer, T.K., Kreuter, M., & Brownson, R.C. (2008). High 5 for kids: The impact of a home visiting program on fruit and vegetable intake of parents and their preschool children. *Preventive Medicine*, 47, 77-82. doi: 10.1016/j.ypmed.2008.03.016