Research Connections conducted a comprehensive search of its collection for resources focused on the relationship between early childhood education and care and home visiting. This Key Topic Resource List includes an overview and listing of selected resources from the literature.

Resources of various types, including, reports and papers, fact sheets and briefs, summaries, and reviews are included. Selection criteria included policy relevance and relatively recent publication (since 2003).

Based on the search results, resources are grouped into the following categories:
- Overview of home visiting
- Home visiting as part of an early childhood program or system
- Home visiting as a method for promoting school readiness
- Home-based child care and home visiting

Within each category, resources are organized according to publisher type and publication date. Research Connections’ descriptions are included for each resource and for journal articles, the author’s abstract is included.
OVERVIEW

Early childhood home visiting is a method for delivering a range of services and supports to families with pregnant women and young children. Services and supports are offered during visits to the families’ homes. The goals of home visiting can vary based on the program. Common goals include preventing child maltreatment, improving maternal and child health outcomes, and increasing school readiness. The resources listed here highlight research on home visiting and its relationship to child care and early education and fit within the 'Integrated Services Programs’ topical classification in our collection. This classification encompasses “resources describing or evaluating programs that integrate health, family support and other services with child care and early education services”. For example, a home visiting initiative that is part of a larger early childhood program or has a specific focus on promoting school readiness and early literacy would be included; however a home visiting initiative focused on preventing child maltreatment or improving maternal health outcomes would not be included.

Some larger literature reviews on home-visiting programs overall are also included to provide an overview on the topic. This includes the work of the Pew Charitable Trusts to provide a national overview of home visiting programs, models and funding, and the Department of Health and Human Services’ Home Visiting Evidence of Effectiveness group (HomVEE), which conducts a systematic review of the home visiting research literature and provides an assessment of the evidence of effectiveness for home visiting programs models that target families with pregnant women and children from birth to age 5. Nevertheless, the listed resources are not meant to be comprehensive on home visiting as a whole.

ACKNOWLEDGEMENTS

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GOVERNMENT REPORTS


The Patient Protection and Affordable Care Act established a Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) that provides $1.5 billion over five years to states to establish home visiting program models for at-risk pregnant women and children from birth to age 5. The Act stipulates that 75 percent of the funds must be used for home visiting programs with evidence of effectiveness based on rigorous evaluation research. The HomVEE review provides information about which home visiting program models have evidence of effectiveness as required by the legislation and defined by DHHS, as well as detailed information about the samples of families who participated in the research, the outcomes measured in each study, and the implementation guidelines for each model. This executive summary provides an overview of the HomVEE review process, a summary of the review results, and a link to the HomVEE website for more detailed information. (author abstract)


This paper describes key lessons learned from the first year of the HomeVEE review about the current state of evidence on the effectiveness of early childhood home visiting, gaps in the research literature that create challenges for assessing effectiveness, and suggestions for strengthening future research in this area. (author abstract)

UNIVERSITIES AND RESEARCH ORGANIZATION REPORTS


In 2010, as part of the Patient Protection and Affordable Care Act, Congress established the new Maternal, Infant, and Early Childhood Home Visiting Program, a major national commitment—$1.5 billion over five years—to expand and improve state-administered home visitation. This initiative mandates that federal funds be spent only on approved models that meet designated, rigorous evidentiary standards and are effectively coordinated and monitored. The federal effort is driven by the recognition that quality home visiting can dramatically improve children’s health and well-being, increase family self-sufficiency and save taxpayers money in both the short and long term. If this potential is to be realized, however, states must ensure that the almost $1.4 billion they make available annually for home visiting also is supporting proven, evidence-based models, and that public expenditures are yielding expected returns. A first-of-its-kind survey, conducted by the Pew Center on the States, investigated the extent to which states are meeting these investment objectives. Pew researchers surveyed agency leaders in all 50 states and the District of Columbia about their state-administered home visiting funding and policies for fiscal year 2010 and looked at each state’s programs—documenting their quality, funding, administration and oversight—to provide a comprehensive picture of the national landscape of state-administered home visiting. The survey found that although nearly all of the states and the District are making critical investments in home visiting programs, evidence of effectiveness too rarely determines how these dollars are spent, oversight is insufficient and funding is inadequate. (author abstract)
UNIVERSITIES AND RESEARCH ORGANIZATION REPORTS

• Daro, D., & Dodge, K. A. (2010). Strengthening home-visiting intervention policy: Expanding reach, building knowledge In R. Haskins & W. S. Barnett (Eds.), Investing in young children: New directions in federal preschool and early childhood policy (pp. 79-88). Washington, DC: Brookings Institution, Center on Children and Families. Many argue that the expansion of home visitation should be built solely around programs that have been proven through carefully structured clinical trials that engage a well-specified target population. We believe this approach is valuable but insufficient to achieve the type of population-level change that such reforms generally promise. We propose a home-visitation policy framework that embeds high-quality targeted interventions within a universal system of support that begins with an assessment of all new parents. This assessment process would carry the triadic mission of assessing parental capacity, linking families with services commensurate with their needs, and learning to do better. (author abstract)

• Kahn, J., & Moore, K. A. (2010). What works for home visiting programs: Lessons from experimental evaluations of programs and interventions (Publication #2010-17). Washington, DC: Child Trends. This literature review synthesizes findings from multiple random assignment experimental evaluations conducted to examine the impacts of various intervention programs with a home visiting component. The goal of this review is to identify programs that work as well as the intervention strategies that contribute to program success. This synthesis examines findings from 66 studies that implemented random assignment intent-to-treat experimental evaluations of programs that include home visiting as a program component. We segmented this analysis by the target population served: 0- to 3-year olds, 4- to 5-year olds, 6- to 11-year olds, and 12- to 17-year olds. While several themes emerge, no one approach, setting, or activity is effective for children across all age groups. (author abstract)

• Olds, D. L. (2010). The Nurse-Family Partnership. In R. Haskins & W. S. Barnett (Eds.), Investing in young children: New directions in federal preschool and early childhood policy (pp. 69-77). Washington, DC: Brookings Institution, Center on Children and Families. The Nurse-Family Partnership (NFP) is a program of prenatal and infancy home visiting by nurses for low-income first-time mothers. NFP nurses help parents improve 1) the outcomes of pregnancy by helping women improve their prenatal health; 2) children’s subsequent health and development by helping parents provide competent infant and toddler care; and 3) parents’ economic self-sufficiency by helping them complete their educations, find work, and plan future pregnancies. In three scientifically controlled trials the program produced benefits in each of these targeted areas. Today the NFP is serving over 20,000 families, and is likely to grow substantially with the support of health care reform. (author abstract)

• Johnson, K. (2009). State-based home visiting: Strengthening programs through state leadership New York: Columbia University, National Center for Children in Poverty. This report is designed to help inform the field about two central questions related to home visiting: 1) How are states investing in home visiting in ways that promote improved outcomes for young children? 2) How, in this context, do they meet the needs of those facing the greatest social and developmental risks? Our purpose was to assess the direction of state policies and programs, not to evaluate program effectiveness. The report first discusses the nature of home visiting programs, and then highlights the results of a survey on how state-based home visiting programs are structured and financed and respond to diverse family needs. The third section describes how states are strengthening home visiting programs. It details three state strategies. The fourth section illuminates major points that surfaced as a result of an NCCP roundtable on the role of home visiting in serving more vulnerable, higher risk families. The report ends with conclusions and recommendations for national and state-level leadership. (author abstract)

• Weiss, H. B., & Klein, L.G. (2006). Changing the conversation about home visiting: Scaling up with quality Cambridge, MA: Harvard Family Research Project. The purpose of this paper is to determine what the evidence and conventional wisdom say about scaling-up home visiting as one of the best ways to support parents and promote early childhood development. To answer this question, we examined the available research evidence, interviewed leaders from six of the national home visiting models, and interviewed researchers who have studied home visiting. The area of interest for guiding future research, practice, and policy is whether home visiting can be delivered at broad scale and with the quality necessary to attain demonstrable, positive outcomes for young children and their parents. (author abstract)

OTHER RESOURCES

As new federal funds augment existing state investments in home visiting, governors have an opportunity to integrate home visiting into an effective and comprehensive early childhood system. Several strategies can ensure that states use new and existing resources wisely to ensure more consistently high-quality programs that are better targeted to families’ needs with less duplication of effort. Governors should lead efforts to: Promote coordinated planning and shared accountability across the agencies that fund home visiting and other early childhood programs; Develop research-based quality standards and support ongoing program improvement; and Improve data linkages to track outcomes and better target services. (author abstract)

JOURNAL ARTICLES


Interpersonal relationships among staff caregivers, parents, and children have been recommended as essential aspects of early childhood intervention. This study explored the associations of these relationships with program outcomes for children and parents in three Early Head Start programs. A total of 71 children (8-35 months, M=20), their parents, and 33 program caregivers participated. The results showed that caregiver-child relationships were moderately positive, secure, and interactive and improved in quality over 6 months, whereas caregiver-parent relationships were generally positive and temporally stable. Caregiver-child relationships were more positive for girls, younger children, and those in home-visiting programs. Caregiver-parent relationships were more positive when parents had higher education levels and when staff had more years of experience, had more positive work environments, or had attained a Child Development Associate credential or associate’s level of education rather than a 4-year academic degree. Hierarchical linear modeling analysis suggested that the quality of the caregiver-parent relationship was a stronger predictor of both child and parent outcomes than was the quality of the caregiver-child relationship. There were also moderation effects: Stronger associations of caregiver-parent relationships with observed positive parenting were seen in parents with lower education levels and when program caregivers had higher levels of education. Practice or Policy: The results support the importance of caregiver-family relationships in early intervention programs and suggest that staff need to be prepared to build relationships with children and families in individualized ways. Limitations of this study and implications for program improvements and future research are discussed. (author abstract)


The purpose of this study is to report on the effectiveness of a coordinated, community-wide intervention to promote early literacy behaviors with low-income parents, especially parents with limited English language proficiency. The interventions include book distribution programs that were based in clinical settings, childcare centers and home visitation programs. The intent of these interventions was to communicate a message that reading to infants and young children and accessing services at the public library are beneficial. The methodology involved in the administration of a Community Based Parental Survey (CBPS) included questions related to early literacy behaviors in order to evaluate the effectiveness of these efforts. Two independent samples collected in 2001 and 2003 were compared. The data comparison between the two time periods showed a 77% increase in parents reporting that they showed books to their infants on a daily basis. There was also a 71% increase in parents reading books aloud to their children on a daily basis. Other indicators also improved. Establishing an early reading ritual encourages infants to have an association to books, helps in language acquisition and supports the social and emotional connection between a parent and his or her young child. The act of holding an infant and reading to him/her on a consistent basis can improve health literacy and hopefully improve student reading achievements. Early interventions like these are relatively low cost and can yield considerable long term results. We conclude that multi-level community based interventions show positive trends in promoting early literacy behaviors. (author abstract)
The implementation efforts of 65 early childhood professionals involved in the Getting Ready project, an integrated, multi-systemic intervention that promotes school readiness through parent engagement for children from birth to age five, were investigated. Digital videotaped records of professionals engaged in home visits with families across both treatment and comparison conditions were coded objectively using a partial-interval recording system to identify and record early childhood professionals' implementation of intervention strategies and their effectiveness in promoting parent engagement and interest in their child. Adherence, quality of intervention delivery, differentiation between groups, and participant responsiveness were assessed as multiple dimensions of fidelity. Early childhood professionals in the treatment group relative to the comparison group demonstrated greater frequency of adherence to some intervention strategies, as well as higher rates of total strategy use. In addition, significant positive relationships were found between years of experience, education and quality of intervention delivery. Quality of intervention delivery was different by program type (Early Head Start versus Head Start). Adherence in the treatment group was correlated with the rate of contact between parent and early childhood professional during the home visit. (author abstract)

One hundred and sixty-four children from a rural county in the state of Maryland, USA, were followed longitudinally from birth until kindergarten entry, tracking their participation in a home visiting program designed to enhance parent child interaction and school readiness. Results suggest that duration of home visiting had a positive, direct effect on home safety and parental knowledge of infant development. Home safety had a positive direct effect on overall school readiness regarding personal and social competence, language and literacy, mathematics and physical health and development, although the effect size for mathematics was smallest. Home visiting duration using Parents as Teachers (PAT) had an indirect effect on school readiness through home safety, suggesting that as families receive more direction on ways to promote positive learning outcomes, home safety scores rise and school readiness scores increase. Implications for program and policy development including universal services are discussed. (author abstract)

In the winter and spring of 2002, 135 kindergartners in five Long Island school districts received a battery of tests focusing on 2 interrelated areas of school readiness: social-emotional skills such as the ability to follow teachers' directions and early literacy skills such as knowledge about books and about the alphabet. In addition, keeping in mind the recommendation of the National Education Goals Panel with regard to school readiness, parents were interviewed about their participation in and support of children's learning at home and at school. Children who had participated in PCHP at ages 2 and 3 were compared, at kindergarten age, with classmates who had not been in the program. Preliminary analyses revealed that PCHP graduates were different from their classmates on a number of variables, however. Specifically, children who participated in PCHP were more likely to have parents who were less educated, more likely to be Latino, and more likely to have parents who worked less hours per week for pay. While there were areas in which the two groups were similar such as family size, likelihood of parents being married, and parents' age, the areas in which the groups were different each represent risk factors for school failure. Low parental education, immigrant status, and poverty are additive risk factors with regard to children's school readiness, such that children who have all three characteristics are at greater risk than children who have two or one. Further, while these are risks that we have defined, they are likely to be concomitant risks that we haven't defined, such as substandard housing and less health care. (author abstract)

One strand of home visiting research investigates efficacy while another investigates under what conditions programs achieve outcomes. The current study follows the latter approach. Using a within-program design in a sample of 11 home-based sites in the Early Head Start Research and Evaluation study, this study found that three components of home visits (quantity of involvement including number of home visits, duration in the program, length of visits and intensity of service; quality of engagement including global ratings of engagement by staff and ratings of engagement during each home visit; and the extent to which home visits were child focused) represented distinguishable aspects of home visit services. Demographic variables predicted components of involvement, and home visit involvement components were differentially related to outcomes at 36 months, after controlling for demographic/family factors and earlier functioning on the same measure. Only one quantity of involvement variable (duration) predicted improvements in home language and literacy environments at 36 months. Quality of involvement variables were negative predictors of maternal depressive symptoms at 36 months. Finally, the proportion of time during the visit devoted to child-focused activities predicted
children’s cognitive and language development scores, parent HOME scores, and parental support for language and learning when children were 36 months of age. Implications for home visiting programs and policies are discussed. (author abstract)

UNIVERSITIES AND RESEARCH ORGANIZATION REPORTS

- Kirkland, K., & Mitchell-Herzfeld, S. (2012). Final report: Evaluating the effectiveness of home visiting services in promoting children’s adjustment in school. Washington, DC: Pew Center on the States. The current study expands the scope of a seven-year randomized controlled trial of an evidence-based home visiting program, Healthy Families New York (HFNY), to examine the effects of home visiting on the academic adjustment of children following their transition to school. (author abstract)


In this chapter, we focus on the effectiveness of home visiting programs in promoting developmental, cognitive, and school readiness outcomes in children. The majority of home visiting services and research have focused on the period prenatally through 2 to 3 years and thus have not measured long-term impacts on school readiness and school achievement. However, more recent studies have examined the impact on these outcomes indirectly through changes in parenting practices and precursors to successful school success (i.e., positive behavior outcomes including self-regulation and attention). (author abstract)


Mathematica Policy Research conducted observations of PFEL home visits between fall 2008 and summer 2009. Trained Mathematica observers conducted three rounds of observations of each PFEL home visitor. The primary goal of these observations was to provide feedback to the home visit teams in each community about the content and quality of their visits. The teams could then use this feedback to support the implementation and quality of their visits. A secondary goal was to pilot the observation measures employed for their potential usefulness in assessing implementation in future evaluations of PFEL. This brief provides an overview of the observation instruments and describes the content and quality of the observed PFEL home visits. (author abstract)


This brief summarizes the communities' progress in developing home-based early learning (HBEL) services based on an implementation study conducted by Mathematica Policy Research during the first year of service delivery (see page 2). It provides an overview of the need for HBEL services in East Yakima and White Center, how the communities selected programs to implement, and how they prepared for service delivery. It then describes the implementation of two established home visiting models and the piloting of a newly developed model. The brief concludes by highlighting key lessons learned and by describing the next steps for continuing to develop the HBEL service delivery system. (author abstract)


We first consider home visiting’s advantages as an approach for helping families enhance their children’s language and literacy development, then we describe home visiting’s role in two major home visiting programs. Next, we discuss some of the challenges for both home visitors and programs involved in delivering services to families and children through home visiting. Finally, we recommend directions for improving the efficacy of home visiting as a service delivery system for family literacy. (author abstract)

GOVERNMENT REPORTS


This report provides a descriptive evaluation of the Enhanced Home Visiting Pilot Project. The aim of the evaluation was to: identify program models and how they were being implemented; determine the characteristics and needs of kith and kin caregivers and the families they served; discover community partnerships; and assess the quality of the caregiving environments. The sources from which data were collected and analyzed include staff and caregiver interviews, administrative records, and observational assessment of child care environment quality. Recommendations are offered for improving quality and supporting the needs of caregivers.
JOURNAL ARTICLES


The early care and education field lacks an evidence base of effective programs to support caregiving quality among family, friend, and neighbor, or unlicensed, caregivers. This article presents the results of a qualitative evaluation of a program implemented with 20 primarily low-income English- and Spanish-speaking grandparents providing childcare for infants and toddlers. Our findings demonstrate the perceived impact of the program, the correspondence with outcomes in support of children's social and emotional development, and the program's feasibility for use with this population. (author abstract)


This brief documents results from an evaluation of the first two years of CFQ (Caring For Quality) program implementation and the effect it had on quality of care provided to young children in home-based child care settings. (author abstract)

UNIVERSITIES AND RESEARCH ORGANIZATION REPORTS


Partners in Family Child Care is an intensive, 10-month home visiting program designed to increase the quality of group family child care in Rochester, in order to improve the early literacy and social-emotional outcomes of children birth to five. Providers receive individualized professional development services to support them in meeting their goals for making improvements in their child care practices. Children are screened for unmet needs and families are linked with resources. Monthly group meetings provide training and allow family child care providers to share strategies as a community of learners to support improvements in child care quality. This report summarizes results of the program for the past three years of implementation (2008-2011). (author abstract)


This brief provides an overview of selected outcomes from the first year of a training and coaching program for child care providers in home-based family child care settings in Rochester, New York. Factors examined in this evaluation were the quality of child care settings, the assessments of children’s development, children’s reading and social-emotional skills, the capability to make referrals to children with special needs, and the sustainability of the program’s staffing.


This report synthesizes our interview findings and presents detailed considerations for implementing home visiting with kinship caregivers and FFN caregivers, including matters of curriculum, staffing, and service referral. It also discusses several opportunities that home visiting models identified that have resulted or could result from serving kinship caregivers and FFN caregivers, including serving more vulnerable children, promoting continuity for children, and expanding research and evaluation. This synthesis draws on descriptions of program models and practices where appropriate; additionally, four promising initiatives are profiled. (author abstract)

To suggest additions to this Key Topic Resource List, please email us at contact@researchconnections.org.

The full results came from a search on: “home visit.” To view and sort the full search results from which these resources were selected, you may use the Create Updated Search function.