

## Healthy Families America

Program Description Excerpted From: <http://captus.samhsa.gov/western/resources/bp/step6/index.cfm>

### Description

(Excerpts from Strengthening America's Families' web-site, <http://www.strengtheningfamilies.org/index.html> and updated with information from Prevent Child Abuse America's web-site, <http://www.healthyfamiliesamerica.org/index.html>.)

Prevent Child Abuse America, formerly known as the National Committee To Prevent Child Abuse, sponsors the Healthy Families America home visiting initiative in over 435 sites across the nation. Healthy Families is a voluntary home visitation program designed to promote positive parenting, enhance child health and development, and prevent child abuse and neglect. Services include parent education and support, linkages to community resources, child development assessments and screenings, and strength-based goal setting. The program is geared towards expectant and new parents who are overburdened.

Program goals include 1) ensuring healthy child development by encouraging parents to utilize preventive health care services such as prenatal care, well-baby check-ups, and timely immunizations, as well as conducting or referring children for developmental screenings; 2) promote positive parenting by having home visitors model behavior for parents and work with parents to increase their bond with their child, helping parents learn about their child's development and how to set appropriate expectations for behavior, as well as strategies for handling challenging situations and positive forms of discipline; and 3) the reduction of child abuse and neglect which utilizes strategies from the other two goals in addition to reducing parental stress, encouraging parents to utilize support systems, and facilitating linkages with resources to address mental health, substance use, and domestic violence issues. Assessments are conducted either prenatally or at the time of birth. Home visiting can begin either prenatally or shortly after birth. The Family Support Worker (FSW) visits at least once a week until the family and the FSW determine together that frequency of visits can be reduced. The FSW helps establish support systems; teaches problem-solving skills; enhances positive parent-child interaction; offers information, education, and referrals to community resources; and helps the family set realistic goals. Once a family is in the program, they can receive services for up to five years.

HFA is based upon a set of critical program elements, defined by more than 20 years of research. All affiliated and credentialed HFA programs adhere to these critical elements which provide the framework for program development and implementation. Staff are trained on the critical elements. Programs are credentialed based on adherence to the critical elements. In addition to helping assure quality, the critical elements allow for flexibility in service implementation to permit integration into a wide range of communities and provide opportunities for innovation. These critical elements provide guidance around when and how services will be initiated, what services will be provided and who will be providing the services.

### Characteristics:

<b>Risk Factors:</b>	<ul style="list-style-type: none"> <li>* Constitutional Factors</li> <li>* Family Management Problems</li> </ul>
<b>Protective Factors:</b>	<ul style="list-style-type: none"> <li>* Bonding</li> <li>* Skills</li> </ul>
<b>CSAP Strategies:</b>	<ul style="list-style-type: none"> <li>* Education</li> <li>* Problem Identification &amp; Referral</li> </ul>
<b>IOM Type:</b>	<ul style="list-style-type: none"> <li>* Selective</li> </ul>

**Populations Found To Be Appropriate For This Practice:**

<b>Specific Ethnic Groups:</b>	(None identified)
<b>Specific Age Levels:</b>	* Early Childhood
<b>Other Specified Characteristics:</b>	Parents with children ages 0-5, facing multiple challenges (e.g. elements that would add stressors to any home: single parent status, low income, substance abuse problems, victim of abuse or domestic violence, etc.) Pregnant women

**Rated Effective By:** \* Office of Juvenile Justice And Delinquency Prevention

For details on the criteria used by each agency, please review the appendix of the following document: [Comparison Matrix of Science-Based Prevention Programs: A Consumer’s Guide for Prevention Professionals](#) (2002 Conference Edition), Center for Substance Abuse Prevention.

**Evaluating This Practice:**

PCA America has developed PIMS, a computerized data collection, management, and reporting tool that enables HFA sites to manage and report on the community programs and participant services they provide. PIMS consists of three interrelated modules: the Program Management Component, the Participant-Level Tracking Component, and the Quality Assurance Monitoring Program. Please contact PCA America or visit <http://www.healthyfamiliesamerica.org/research/pims.shtml> for more information about PIMS.

Evaluations of this program are and have been conducted at both the program and state levels. This best practice does not come with a specific evaluation tool that can be used when implementing this strategy. However, the credentialing process that Healthy Families America uses ensures fidelity of the implementation of the program. In addition, HFA programs utilize a variety of evaluation tools to measure the effectiveness of a variety of outcomes. Staff at PCA America can provide more information.

The following are suggestions of areas you may want to assess if you implement this best practice. For assistance on creating an evaluation plan, refer to [Step 7: Evaluation](#).

- Assess change in family management skills by parent participants
- Assess reduction in parental risk factors
- Assess change in utilization of community services
- Assess change in the home environment (e.g. being made safer through child proofing, more stimulating for children through the addition of books and age appropriate toys)
- Assess change in access and utilization of health care services
- Assess rate of child maltreatment by parent participants
- Assess level of positive parent-child interaction patterns in participant families
- Assess model fidelity

**Research Conclusions:**

(Excerpt from Strengthening America’s Families’ web-site, <http://www.strengtheningfamilies.org/index.html>.)

In 1992, Healthy Families America moved forward with the home-visiting model based on a comprehensive evaluation, using an experimental design that was conducted with 372 families in the Hawaii Healthy Start program. The results indicate that early and intensive home visitation by highly trained staff produces measurable benefits for participants in the areas of parental attitudes toward children, parent-child interaction patterns, and type and quantity of child maltreatment. Mothers who received home visits significantly reduced their potential for physical child abuse and showed significant

positive changes in maternal involvement and sensitivity to child cues. Treatment families exhibited more positive parent-child interaction patterns at both six- and twelve-month assessment points.

Since then, numerous evaluations have occurred at both the site and state levels. Results from these evaluations demonstrate that HFA: promotes positive parenting practices, improves family health, enhances school readiness and increases self-sufficiency, thus reducing the risk factors that are linked to child maltreatment. For more information on evaluations results, download a copy of the HFA Research Folder at <http://www.healthyfamiliesamerica.org/publications/#research>

**Cost:**

**Training Time:** 5 consecutive days. One day of training is reserved for Program Managers and Supervisors to discuss specific program implementation issues and receive training pertinent to their role(s) in the program. In addition to conducting primary training, HFA program sites should develop a curriculum of wraparound training for their staff. HFA programs typically reach out to members of their own communities to fulfill their wraparound training needs.

**Training Cost:** Please visit the website at [http://www.healthyfamiliesamerica.org/network\\_resources/training.shtml#costs](http://www.healthyfamiliesamerica.org/network_resources/training.shtml#costs) for information on training costs.

**Implementation Cost:**

The average annual cost to provide services to families is \$3,348. The range is from \$1,950 to \$5,768. Programs differed in the methods used to determine costs per family. Most programs determined this figure by dividing their total budget by the number of families enrolled, served or unduplicated.

**Special Considerations:**

The following should be taken into consideration before selecting this strategy to be implemented in your community:

An Application for Affiliation is completed by new programs to ensure that Healthy Families is a good fit for them and their community. Please contact Healthy Families America or a Regional Resource Center for more information. In addition, organizations or individuals interested in launching an HFA program may want to take a look at the HFA Site Development Guide which can be ordered through the website at: [http://www.healthyfamiliesamerica.org/publications/order.shtml#program\\_sites](http://www.healthyfamiliesamerica.org/publications/order.shtml#program_sites)

**Contact Information:**

For more information on this program, visit: <http://www.healthyfamiliesamerica.org/>

**For technical assistance, training, and materials, contact:**

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