JBAY

JOHN BURTON Advocates for Youth

The Status of Home Visiting Services for Expectant and Parenting Foster Youth in California



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SUMMARY

The Family First Prevention and Services Act (FFPSA) authorizes states to use federal funding to provide evidence-based prevention services to expectant and parenting youth and nonminor dependents. Foster youth who are expectant or parenting are categorically eligible for prevention services under FFPSA, provided the services are "supported" or "well supported" in the Title IV- E Prevention Services Clearinghouse. This newly available funding provides an important opportunity for California to better serve young families in foster care by expanding access to evidence-based home visiting programs.

Home visiting is a prevention strategy used to support expectant individuals and new parents to promote infant and child health, promote educational development and school readiness, and help prevent child abuse and neglect. Research has consistently shown that home visiting programs improve the health of the parent and child through in-home visits with trained professionals, such as nurses, who assist with parenting skills and family bonding. To understand current policy and practices related to home visiting programs for expectant and parenting foster youth, John Burton Advocates for Youth (JBAY) surveyed county child welfare agencies in September 2021.



METHODOLOGY

In partnership with the County Welfare Directors Association of California (CWDA), JBAY administered a 12-question online survey to all 58 counties. Thirty-five child welfare agencies responded to the survey (66%), representing approximately 651 (90%) of the 722 minor and nonminor dependent parents in foster care in California.[1]

1 Data Source: CWS/CMS 2021 Quarter 2 Extract. Program version: 2.00 Database version: 73F8FOE9 CCWIP reports. Retrieved Oct 02, 2021, from University of California at Berkeley California Child Welfare Indicators Project website. URL:https://ccwip.berkeley.edu

FINDINGS

A primary goal of the survey was to understand the extent to which county child welfare agencies provide home visiting programs to expectant and parenting foster youth and to understand how formalized this process is locally. The provision of home visitation for expectant and parenting foster youth varies considerably across counties. Those with more established processes have adopted county policies requiring case workers to refer an expectant or parenting youth to home visitation, together with a step-by-step procedure for how to make the referral. Some of these counties also have a Memorandum of Understanding (MOU) with their local home visiting program specifying how referrals are made and what data is to be collected. Other counties reported a less structured utilization of home visiting programs, without a county policy or procedure or an MOU with a local home visiting provider.

Provided below is a summary of county responses about the structure of their home visiting services for expectant and parenting youth, the involvement of foster care public health nurses, the goals of home visitation for expectant and parenting youth, the perception of effectiveness of local partnerships, data collection, the home visiting programs utilized, and the commonly cited challenges faced by counties in operating home visiting programs for expectant and parenting foster youth.

1 Most respondents reported that their county **does not have a written policy and procedure** to refer all expectant and parenting foster youth to home visiting services.

- Four out of five counties (80%) reported that they did not have a written policy and procedure to refer all expectant and parenting foster youth to home visiting services, such as Nurse Family Partnership. A total of 17% of county respondents reported that they did have a written policy and the balance (3%) were unsure. While the largest percentage of counties did not have a written policy or procedure, those who did were counties with greater numbers of parenting youth. Given this, 58% of parenting youth live in a county that has a written policy and procedure to refer all expectant and parenting foster youth to home visiting services.

2 Most counties reported that **social workers** routinely refer expectant and parenting foster youth to a home visiting program.

- A total of 71% of county respondents reported that social workers in their county routinely refer expectant and parenting foster youth to a home visiting program. Twenty percent reported that social workers do not routinely refer expectant and parenting foster youth to a home visiting program and the remainder (9%) reported that they were unsure.

3 The majority of counties do not require the **foster care public health nurse** to be informed when a referral to home visitation is made for an expectant or parenting foster youth.

- A total of 54% of responding counties reported that they do not have a protocol requiring the foster care public health nurse to be informed when an expectant and parenting foster youth is referred to home visitation; 33% reported that they do have such a requirement. The remainder of respondents (13%) were unsure.
- Counties that reported having this requirement had greater numbers of parenting foster youth. Given this, over two-thirds of parenting foster youth (67%) live in a county that has a protocol to require the foster care public health nurse be informed when an expectant and parenting foster youth is referred to home visitation.

4 Half of counties do not have a **Memorandum of Understanding** (MOU) with a home visiting program to deliver services to expectant and parenting foster youth.

- Half (50%) of respondents reported that their county does not have an MOU with a home visiting program to deliver services to expectant and parenting foster youth. Twenty-nine percent of respondents reported their county has an MOU and the remainder (21%) were unsure.

5 Child welfare agencies share common home visiting **goals** in the implementation of their home visiting programs.

- The top three goals for providing home visiting programs to expectant and parenting foster youth identified by county respondents were to improve maternal and infant health (92%), reduce Adverse Childhood Experiences and behavioral and intellectual issues of children (83%), and improve prenatal and postnatal care access (83%). Less commonly indicated goals included to reduce infant injuries and accidents (79%), improve language and early learning of children (58%), and reduce unintended subsequent pregnancy for current parents (67%).
- In narrative responses, county respondents indicated additional goals for providing home visiting programs to expectant and parenting foster youth. These included to ensure new parents are utilizing safe sleep practices; increase bonding; reduce the likelihood of the child entering the child welfare system; and to provide linkages to education, early start, and post-partum mental health services.

6 Most counties reported that **more than half of referrals** of expectant and parenting foster youth to home visitation were successful.

- Over a third of respondents (38%) reported that 80% or more of expectant and parenting foster youth who are referred by their county go on to receive home visiting services. Fifty-five percent of respondents reported that 60% or more of referrals to home visitation are successful. A total of 46% of counties reported that less than 60% of youth referrals to home visitation result in home visiting services. While these were the findings statewide, it should be noted that a select number of counties with a large number of parenting foster youth reported a rate of 50%, which was lower than the statewide average.

% of referrals that result in home visiting services	% of counties reporting this level of success
80% to 100%	38%
60% to 79%	17%
40% to 59%	29%
20% to 39%	4%
0% to 19%	13%

7 Two of the most utilized home visiting programs by county child welfare agencies are **eligible for federal funding** under the Family First Prevention Services Act.

- Counties were asked about which home visiting program are utilized for expectant and parenting foster youth. The three most utilized programs by child welfare agencies were the Early Head Start Home-Based Option (11 counties), Nurse Family Partnership (9 counties), and Parents as Teachers (7 counties). Two of the top three programs are listed as "well supported" on the Title IV-E Prevention Services Clearinghouse. Provided below is the list of home visiting programs reported as utilized for expectant and parenting foster youth.

NUMBER OF CHILD WELFARE AGENCIES REPORTING UTILIZING THE PROGRAM	HOME VISITING PROGRAMS UTILIZED FOR EXPECTANT AND PARENTING FOSTER YOUTH	TITLE IV-E PREVENTION SERVICES CLEARINGHOUSE PROGRAM OR SERVICE RATING
11	Early Head Start Home-Based Option	Not listed
10	Nurse-Family Partnership (NFP)®	Well-supported
7	Parents as Teachers (PAT)®	Well-supported
5	Maternal Infant Health Program (MIHP)	Not listed
4	Early Intervention Program for Adolescent Mothers	Not listed
3	Healthy Beginnings	Not listed
3	SafeCare Augmented	Does not currently meet criteria
2	Maternal Early Childhood Sustained Home-Visiting Program (MECSH)	Not listed
1	Child First	Supported
1	Early Start (New Zealand)	Not listed
1	Healthy Families America (HFA)®	Well-supported
9	Other**	Not listed

*** Birth and Beyond Home Visitation Program, Black Infant Health Program, Partnerships for Families, Welcome Baby, MAMAS, Low-Income First-Time Mothers, First Five First Steps, Teenage Pregnancy and Parenting Program (UC Davis), Birth and Beyond Home Visitation, Road to Resilience*

8 **Data collection** about home visitation for expectant and parenting youth is limited.

- When asked about data collection, 21% of county respondents reported that they collect data about home visiting services received by expectant and parenting foster youth, such as duration of services and outcomes. Forty-two percent reported that they did not collect data and the remaining respondents (37%) were unsure whether or not data was collected.

9 Counties generally regard their **partnership** with local home visiting programs as very effective.

- When asked how effective the partnership is with their local home visiting program for expectant and parenting foster youth, 92% of county respondents reported the program partnership was extremely effective, very effective, or effective, with 8% reporting the partnership as ineffective or extremely ineffective.



10 Lack of foster youth **engagement** was the most prevalent challenge cited by county respondents.

- Counties were asked what challenges they faced when establishing a home visiting program partnership for expectant and parenting foster youth. The top reason cited included "Foster youth does not choose to participate in the home visiting program" (50%), followed by "Local home visiting programs are at capacity" (33%). Other challenges noted were "Restrictions on in-person visits for home visiting programs due to COVID-19."
- In their narrative response, respondents elaborated on the challenges they have faced and provided information about additional challenges establishing home visiting programs for expectant and parenting foster youth:
  - Pregnant and parenting foster youth are reluctant to receive services due to lack of trust in the public health nurse and fear of referral.
  - The greatest challenge is engaging the youth in the services. Youth often decline to participate.
  - Lack of nursing staff.
  - Currently the program is only offering virtual services. There are also staffing issues that the service provider has been dealing with such as maintaining adequate staff for the program.
  - We are a very small county with less than 10 youth in foster care at any given time. It has been several years since we have had an expectant/parenting youth on our caseload. As such, we don't have a formal policy.
  - We have expectant and parenting foster youth infrequently.
  - We need to improve coordination with these programs and child welfare.
  - Our county does not have any community-based organizations that provide home visitation programs.

APPENDIX A.

NUMBER OF PARENTING YOUTH IN CARE AS OF JULY 1, 2021

COUNTY	PARENTING YOUTH
Los Angeles	300
San Bernardino	46
Sacramento	37
Orange	30
Kern	27
Riverside	25
San Joaquin	25
San Diego	21
Tulare	14
Alameda	14
Stanislaus	13
Santa Clara	12
Fresno	11
Ventura	11
Balance of the State	136
Total	**722**



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