



Harvard Family Research Project
Harvard Graduate School of Education

Since 1983, we have helped stakeholders develop and evaluate strategies to promote the well being of children, youth, families, and their communities.

United States House of Representatives Committee on Education and Labor

Hearing on
"H.R. 2343, Education Begins at Home Act"

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On Behalf of
Harvard Family Research Project.

Chairman Miller and Members of the Committee:

Thank you for the opportunity to provide testimony at this important hearing on the Education Begins at Home act. My name is Heather Weiss and I am the Founder and Director of the Harvard Family Research Project at the Harvard University Graduate School of Education. I have spent the past thirty years of my work devoted to building the knowledge base for programs and policies that strengthen and support families, schools and communities as settings for child development. We regularly compile and synthesize research and evaluation studies to guide policy, practice and evaluations, and to provide programs with tools and information to guide their evaluations. My colleagues and I at the Harvard Family Research Project are known for our work building the research base for complementary learning supports which we define as a systemic approach that intentionally integrates school and non-school supports such as home visitation and afterschool programs with schools to promote educational and life success. Complementary learning builds on a long history of theory and research about the many contextual influences on children's development and on the research-based understanding that neither schools nor families nor communities alone can ensure learning and educational achievement. I sit on numerous advisory boards, advise on and evaluate major foundation grantmaking initiatives for children and families, and recently served on the National Academy of Sciences Institute of Medicine Committee evaluating the implementation of PEPFAR with particular attention to its effects on orphans and vulnerable children.

Let me start with a useful and undeniable fact: The evidence from over forty years' research into the factors that affect children's education is both consistent and substantial. Family involvement in a child's learning at home, at school, and in the community is one of the strongest predictors of social, emotional and academic development.¹ Nurturing and responsive parenting is a critical factor in ensuring that children are ready to enter and to exit from school with the skills they need to succeed in higher education and in the global workforce. Children and youth with involved and supportive parents from birth through adolescence do better in many ways. They are more ready to succeed in school, and they get better grades, have higher graduation rates, and are more likely to go to college.²

The Education Begins At Home Act (EBAH), providing funding for states to develop, deliver and evaluate home visitation as a core component of early childhood services, is a key piece of the national effort to insure that all children succeed for several reasons. It is the first dedicated federal funding stream providing information and support for parents to help them enhance their children's early development. Beginning at birth, home visitation establishes the critical importance of parent involvement in learning and helps parents and schools understand and reinforce its continued importance through the child's entire school career. Evaluations of home visit programs indicate that when they are delivered with sufficient frequency and quality, they help parents, particularly economically and otherwise disadvantaged ones, get what they need to help their children succeed. The evaluations suggest that these programs can increase school readiness, increase parents' understanding of their role in child development, strengthen parenting practices, improve maternal and child health, and help to reduce child maltreatment. The provisions of the EBAH Act draw from the most recent research and evaluations laying out

¹ Bouffard, S., Weiss, H., Gordon, E. and Bridglall, B. (2008). Family involvement and Educational Equity. *Equity Matters* series from the Campaign for Educational Equity, Teachers' College, Columbia University; Belsky, J. et al, and the NICHD Early Child Care Research Network (2007), Are there long-term effects of early child care? *Child Development*, 78(2), 681–701.

² Harvard Family Research Project, *Family Involvement Makes a Difference* series of 3 research briefs at <<http://www.hfrp.org/publications-resources/publications-series/family-involvement-makes-a-difference>>

what it takes to develop effective home visit services and this increases the likelihood of strong returns on investments in these early parent support and education services.³

My review of the home visit research and evaluation literature addresses three central questions:

1. What is the evidence that early childhood home visit programs create positive changes in parenting and parent involvement in learning that lead to better outcomes for children?
2. What is the evidence that the home visit field is ready to scale up and that it can produce these positive outcomes at greater scale within states?
3. How does the EBAH legislation incorporate the lessons from past evaluations and leaders in the home visit field, thereby increasing the likelihood of returning positive results at greater scale?

This testimony and research review draw from several areas in my research and professional experience: individual evaluations of national home visit program models; several literature reviews of home visitation conducted over the past fifteen years⁴; a recent meta-analysis of 60 programs employing home visitation as the primary service delivery strategy⁵; and interviews with leaders from six well-established national home visit program models and selected home visit researchers and evaluators.⁶ Several national home visit models have conducted rigorous experimental or quasi-experimental evaluations of their programs at one or more sites in the past twenty years; by 2004, there were enough peer-reviewed studies by these and other programs to warrant meta-analysis.

I also draw on my on-the-ground experience with The Home Visit Forum, a consortium of six national voluntary home visit programs which operated from 1999 to December 2005. The consortium was organized by the Harvard Family Research Project, in conjunction with Deborah Daro of Chapin Hall and Barbara Wasik of Johns Hopkins University, to strengthen the research and evaluation and continuous improvement capacity of the home visit field and to build its knowledge base.⁷ The Forum members included representatives from Early Head Start, Healthy Families America, Home Instruction for Parents of Pre-School Youngsters (HIPPY), the

³ Weiss, H.B. and Klein, L. (2006). Changing the Conversation About Home Visitation: Scaling Up With Quality. <<http://www.hfrp.org/publications-resources/browse-our-publications/changing-the-conversation-about-home-visiting-scaling-up-with-quality>>

⁴ Weiss, H.B. (Winter, 1993), Home visits: Necessary but not sufficient, *The Future of Children*, 3(3) 113–28; Gomby, D.S. (January 2003), *Building school readiness through home visitation*, Paper commissioned for First Five California Children and Families Commission. Available at: <http://www.cafc.ca.gov/SchoolReady.htm>; Daro, D. (September 2006) *Home Visitation: Assessing Progress, Managing Expectations*, Written Testimony for House Subcommittee on Education Reform, Committee on Education and the Workforce. Available at: www.chapinhall.org; Raikes, H., Green, B., Atwater, J., Kisker, E., Constantine, J., & Chazan-Cohen, R. (2006), Involvement in Early Head Start home visiting services: Demographic predictors and relations to child and parent outcomes, *Early Childhood Research Quarterly*, 21, 2-24; Weiss & Klein (2006).

⁵ Sweet, M.A. & Appelbaum, M.I. (2004), Is home visiting an effective strategy? A meta-analytic review of home visiting programs for families with young children, *Child Development*, 75(5):1435-1456.

⁶ Weiss and Klein (2006).

⁷ Weiss, H.B. (2006) Lessons from a Community of Practice: The Home Visit Forum 1999 – 2005 and After. Available at www.hfrp.org.

Nurse-Family Partnership, Parents As Teachers (PAT) and the Parent Child Home Program. Each of these are home visitation models serving children during the course of the first five years of life and emphasizing different aspects of parenting and child development. Early Head Start is the early years component of the Head Start program and it includes both home visitation and a center-based component. Healthy Families America is a program that begins in the first year of life and specifically targets families considered to be at risk for abuse and neglect. HIPPY serves 3-5 year olds with a parent-child literacy emphasis. The Nurse-Family Partnership works with first-time teen mothers beginning in the third trimester of pregnancy and continuing through the second year of life and provides a series of maternal and child health and early parenting supports. Parents As Teachers works with families with children in the first two years of life and provides an array of parenting services. The Parent Child Home Program focuses on family literacy for children from ages 3 – 5. Each of the models is national in scope and coverage and has been providing services for at least twenty years.

Overview of Early Home Visitation

Voluntary home visiting programs provide parenting education and support at home or other locations chosen with families. Different program models target different kinds of families, ranging from first-time teen mothers to all families with children in their requisite age group, and they typically provide services anywhere from a two- to a five-year period. As the table below with information from six of the national models shows, programs differ in their goals and the types of families they serve, and as a result, they focus on achieving different – although sometimes overlapping – outcomes.

	Population Served	Program Goals
Early Head Start	Low-income pregnant women with infants and toddlers	Promote healthy prenatal outcomes, enhance development of young children, promote healthy family functioning
Healthy Families America	Parents of all income levels identified as at-risk for abuse and neglect	Promote positive parenting, prevent child abuse and neglect
The Home Instruction Program for Preschool Youngsters (HIPPY)	Families, many low-income but no restricted income guidelines	Empower parents as their children’s educators, enhance children’s early school success
The Nurse-Family Partnership	Low-income, first-time mothers	Improve pregnancy outcomes, child health and development, family economic self-sufficiency
The Parent-Child Home Program	Low-income families	Develop children’s language and literacy skills and prepare them for academic success, empower parents and enhance parenting skills
Parents as Teachers	Parents of all income levels	Empower parents and increase their knowledge of child development, prepare children for school success

Most programs also connect families with other community resources to support families, including health, mental health, social and other services.⁸ As of 2001, at least 37 states had home visiting systems in place, and the number is no doubt higher now.⁹ Many are experimenting with targeted vs. universal services, targeting particular models to particular groups, combining models for coverage from birth through preschool, and combining home visitation with center-based early care and education.

Early childhood home visitation programs are viewed as a promising strategy for helping parents and thereby promoting the growth, development and school readiness of young children because, as developmental research consistently confirms, young children are most likely to reach their full potential when they have nurturing, stimulating and supportive relationships with their caregivers.¹⁰ Home visit programs focus on building such relationships.

As Hart and Risley's (2002) path-breaking study of the role of families in early development indicated, children's early language and literacy development, as well as their understanding of their capacity to learn, are shaped in the everyday interactions they have at home with their parents in the first few years.¹¹

This study, as well as other research on early development, indicates that economically disadvantaged children are less likely to have rich home literacy environments or frequent positive interactions and experiences with their economically-stressed parents. This in turn puts them at a disadvantage when they begin school.¹² Child development research affirms the importance of parenting practices and involvement for early childhood development. Home visitation programs are one way to reach busy parents and offer them regular information and support with potential benefits for both the children and the family.

A recent report from the National Institute of Child Health and Development-sponsored longitudinal Early Care and Youth Development study examining the effects of early childhood care and education and parenting on children's development and school success substantiated the powerful role parenting plays in children's development across a range of academic, social and emotional skills in elementary school. As its authors note, these results suggest the importance of attention to parenting support as well as high quality early care and education services in early childhood.

(Belsky et al and NICHD, 2007)

⁸ Wasik, B.H. & Bryant, D.M. (2001), *Home Visiting*, Thousand Oaks, CA: Sage.

⁹ Johnson, K.A. (May 2001), *No place like home: State home visiting policies and programs*, Johnson Group Consulting, Inc., Report commissioned by The Commonwealth Fund. Available at www.cmf.org.

¹⁰ Bronfenbrenner, U. (1974), Is early intervention effective? *Teachers College Record*, 76(2), 279-303; Shonkoff, J. & Phillips, D. (2002), *From Neurons to Neighborhoods: The Science of Early Childhood Development*, Washington, DC: National Academy Press; Harvard Family Research Project (2007), *Family Involvement in Early Childhood Education from Family Involvement Makes a Difference* series of 3 research briefs at <<http://www.hfrp.org/publications-resources/publications-series/family-involvement-makes-a-difference>>

¹¹ Hart, B. & Risley, T.R. (2002), *Meaningful Differences in the Everyday Experience of Young American Children*, Washington, DC: Brookes.

¹² Bouffard, Weiss, Gordon and Bridglall (2008).

Question 1: What is the evidence that early childhood home visitation programs create positive changes in parenting and parent involvement in learning that lead to better outcomes for children?

Most of the narrative reviews over the past fifteen years, as well as the recent meta-analysis, conclude that home visitation programs can produce positive changes across an array of child and parent outcomes when the conditions for high quality services are met. Sweet and Appelbaum 's meta-analysis examined five parent and five child outcomes and found home visiting was associated with improved parenting attitudes and behaviors; mothers returning to school; children with better social, emotional and cognitive abilities; and less potential for child abuse based on emergency room visits, injuries and accidents. They, like most other reviewers, concluded that home visit programs are a promising but not yet proven strategy. Such programs create modest but potentially important positive changes, for, as Sweet and Appelbaum note, "all effect sizes fall in the small category...statistical significance, however, does not necessarily indicate practical significance and whether or not the magnitude of observed effects is meaningful and important remains to be determined" (1435-1456). As will be noted below, several of the national models have studies indicating longitudinal benefits of early home visitation for children and for families.

At the same time, twenty-five years of investments in evaluation are paying off in a clearer understanding of the characteristics of high quality programs, and of the circumstances necessary for home visitation to produce these and other benefits as they go to greater scale around the country. Expectations for home visitation must be realistic. Home visits are "necessary but not sufficient,"¹³ and to be effective, they should be embedded in a comprehensive system of early childhood services, especially when they serve highly stressed or economically or otherwise disadvantaged families. Evaluations of several of the major home visit models also suggest that home visitation in conjunction with high quality early childhood education and/or preschool is more likely to result in positive gains.

The comprehensive evaluation of Early Head Start's (EHS) home visiting, center-based and mixed home visit and center models showed that the mixed approach had the broadest range of significant impacts, including on children's language, social-emotional development, and on parents in terms of reading more to their children, being more supportive during play, and using less physical punishment, supporting the case for a mixed home and center approach. Similarly, a non- experimental evaluation of the Parents As Teachers Program (PAT) found the best outcomes when home visitation was combined with center-based care or preschool. Minority and non-minority children and those in high- and low-poverty schools who participated in PAT and preschool scored higher on kindergarten readiness assessments, as did EHS children who also participated in PAT and preschool. Children cared for only at home but participating in PAT scored higher than those whose parents did not participate. The combination of home visitation and center-based early childhood programs can enhance literacy, math and behavioral readiness for school, all key to early school success.

The Nurse Family Partnership, serving first time teen mothers and their children from the third trimester of pregnancy through age two, has demonstrated strong positive results, including healthy pregnancies, increased time between births, decreased substance abuse, decreased child maltreatment, and decreased arrests of mothers and their children, with evaluations employing longitudinal experimental research designs.
- Olds (2006)

¹³ Weiss & Klein (2006).

Several of the national models target early literacy, and their evaluations suggest promising results with respect to language and literacy development. In a study of kindergarten readiness, The Parent Child Home Program (PCHP) found significant increases in school readiness for participating at-risk children.¹⁴ HIPPI USA has promising results in the second year of a three-year study of HIPPI AmeriCorps programs with respect to an array of parent literacy-related behaviors and practices and indicators of children's language and literacy.

There are a few studies which suggest long-term educational and societal benefits from early home visitation, and fewer still which examine cost analyses. However, several of the national home visit models have longitudinal research underway and there are calls for new cost-benefit studies. In addition to positive results from the longitudinal research on the Nurse-Family Partnership (noted in the textbox above), the Parent Child Home Program (PCHP) has followed up and compared results for at-risk children who completed the program and a control group. PCHP children had significantly higher rates of graduation. Several of the national program models target reduced costly child maltreatment as a key program goal and outcome, including the Nurse-Family Partnership and Healthy Families America. These programs show some promising results, particularly for mothers with the fewest resources to draw on, those who are younger, economically disadvantaged and first-time mothers.¹⁵ The two available cost-benefit analyses suggest that benefits can outweigh the costs, but they are preliminary, suffer from insufficient information – particularly across and within the major models – and serve primarily as an incentive to do further cost-benefit studies with better information.¹⁶

Twenty five years of evaluation of voluntary home visit programs indicates that it is critically important to keep expectations of what they can achieve reasonable and realistic, and to embed home visitation within a system of early childhood services. It is also important to insure that there are means to connect families with other accessible family support services and supports. Programs with theories of change that carefully link program inputs and processes to desired outcomes, that continually measure their performance and that use the results as well as other research for continuous improvement and innovation, are more likely to provide the quality necessary to get the desired child and family outcomes. There are a number of examples of this. The Nurse-Family Partnership has been experimenting with a new curriculum which has shown promise in reducing domestic violence. PAT has redone its curriculum in accord with the latest research on child growth and development from neuroscience. Evaluations also suggest the importance of sufficient resources to hire competent staff, provide ongoing and high-quality training and supervision, insure strong organizational capacity, and allow attention to outreach and program engagement in order to build the family-visitor relationship and insure sufficient dosage to get results. When these quality indicators are not in place, there is much less likelihood that investments in voluntary home visitation will pay off in better results for children and families. When they are, home visitation can provide information and support to families that set them on a path to nurturing and responsive parenting and continued involvement with the child's learning into and through the school career.

¹⁴ Levenstein, P., Levenstein, S., & Oliver, D. (2002), First grade school readiness of former child participants in a South Carolina replication of the Parent Child Home Program, *Journal of Applied Developmental Psychology*, 23 (3) 331-353.

¹⁵ DuMont, K., Mitchell-Herzfeld, S., Greene, R., Lee, E., Lowenfels, A., & Rodriguez, M. (June 2006), *Healthy Families New York Randomized Trial: Impacts on Parenting After the First Two Years*, New York State Office of Children and Family Services, Working Paper Series: Evaluating Healthy Families New York. Available at: www.ocfs.state.ny.us/main/prevention/assets/HFNYRandomizedtrialworkingpaper.pdf; Olds, D. (2006), The Nurse-Family Partnership: An evidence-based preventive intervention, *Infant Mental Health Journal*, 27 (1), 5-25.

¹⁶ Weiss and Klein (2006); Gomby (2003).

Question 2: What is the evidence that the home visit field is ready to scale-up and that it can produce positive outcomes at a greater scale within states?

Voluntary home visitation has been provided to families with young children from at least the nineteenth century through to today. The current major national home visit models date from the 1970's, and a number of them have been gradually going to greater scale in communities and now states around the country. Spurred by the national movement to results-based accountability, as well as by sometimes mixed evaluation results, national home visit models have been building their national training and technical assistance capacities, partnering with each other, and working to build their capacity to evaluate, track and improve their performance and to be accountable for the results they seek to obtain. The leaders of these national models, as well as those creating state early childhood systems, are very aware that in the current and future policy environment, even experimental evidence that a program works in one place is insufficient to warrant scale-up and sustained funding. They understand that in current and future policy environments, there are now two key questions that must be addressed: Is there experimental evidence that voluntary home visitation "works?" and "Does the field have the understanding of and capacity to provide what it takes to go to, and return results at, scale?"

In 2006, Weiss and Klein reviewed the evidence on home visitation to address the question of readiness to scale. They concluded, given the current state of knowledge and appropriate demands for demonstration of returns on investment, that voluntary home visiting is a wise bet so long as four conditions around home visitation capacity and infrastructure are met as expansion occurs:

1. First, given the substantial and growing body of evidence about home visiting, new and continued funders and their funding should ensure that there is national and state support so that providers have the commitment and capacity to incorporate lessons from their own and each others' research and evaluation for program improvement as they go to and operate at greater scale.
2. Recent meta-analyses suggest that looking across as well as within programs provides information about the specific capacities, characteristics and activities that contribute to more positive outcomes for children and families. Therefore, a second condition is that home visiting programs must regularly collect and report information on their progress and outcomes to determine if their hypothesized outcomes are being achieved.
3. The third condition is that national models and others doing research, evaluation and performance monitoring share their information and results to build the collective knowledge base and inform public policy on home visitation.
4. Finally, because recent evaluations have shown that home visiting can be more effective for economically and otherwise disadvantaged families when it is paired with center-based early childhood and/or prekindergarten programs, the fourth condition is that there be support for and encouragement of trials of these and other combinations to better understand how home visitation fits with and contributes to a comprehensive system of early childhood child and family supports.

Weiss and Klein also interviewed representatives of the national models and selected researchers and evaluators knowledgeable about home visitation to get their perspectives and recommendations about investments in knowledge development and system and capacity building that would support efforts to scale high quality and effective home visitation programs.

There followed six recommendations about what is necessary to deliver quality services at scale:

1. Develop mechanisms to test and report on the extent to which quality home visiting at scale improves outcomes for young children and parents.
2. To increase the likelihood of achieving results at scale, and to support learning and continuous improvement efforts, programs should use a management information system for tracking and monitoring activities.
3. Identify what capacity is needed to maintain quality at scale in areas including training, supervision, technical assistance, research, communication, and advocacy, and feed this information back in to support capacity building in each of these areas.
4. Invest in research to better monitor and understand what happens in visits that leads to improved outcomes and to support training and supervision efforts.
5. Invest in research to better match program goals, activities, and intensity with family circumstances, home visitors, and supports to get the best outcomes for young children and parents. This information is essential for decisions about targeted vs. universal services, allocation of families to particular models, and for decisions about how to integrate home visitation into other early childhood services.
6. Identify realistic expectations for what home visiting can accomplish and hold programs accountable for achieving those outcomes.

The interviews with the national model representatives indicated that they are implementing these recommendations now, and that they are working with a number of state government and nonprofit organizations in their efforts to do so. The details of their work are described in Weiss and Klein, 2006. Continuation of these efforts is important as home visitation moves from individual model-led national expansion to expansion within a state-led system of home visitation services integrated into a larger comprehensive system of early childhood child and family supports. There is much to be learned from the efforts of the six models as states scale home visitation services. There are also key decisions to be made about a national research and evaluation agenda for home visitation and how state program expansion will fit with and benefit from national or cross state evaluation, performance management, continuous improvement and accountability efforts.

Several of the recommendations above may be most efficiently managed at the national level with states contributing data and experiences, while others might best be handled at the state level with a commitment to cross-state and national information sharing and synthesis. So, for example, states should oversee the development of management information systems but they can learn from the national models and from each other as they do so. Program expansion arguably should be tied to a transparent and effective system for collecting indicators of performance and evidence of use for program improvement purposes. Research on what happens in home visits – with resulting implications for targeting, training and supervision, on the other hand – might best be part of a state-informed but nationally developed and funded research and evaluation agenda, again committed to dissemination of results to support continuous improvement efforts. As home visiting moves to scale, it will also be important for states to suggest other questions for a nationally-funded research and evaluation agenda that

would in turn inform their work and quality improvement efforts. Coordinated national and state efforts will be necessary to address recommendation five, research and evaluations to answer key policy questions about what types of home visitation, in combination with what other supports and early childhood services, work when and how for what types of families in order to promote school readiness and other valued outcomes.

In sum, the promising evidence on home visit effectiveness and the field's growing understanding of what it takes to develop and implement high quality services lead many to conclude they are worthy of investments to scale-up, so long as all the conditions noted above, particularly their integration into a comprehensive system of services, are met.

Question 3: How does the EBAH legislation incorporate the lessons from past evaluations, and thereby increase the likelihood of returning positive results at greater scale?

The Education Begins at Home Act – with three years' funding for states to expand access to early childhood home visitation services with related supports and provisions for quality implementation and evaluation – draws from and is consistent with the lessons and recommendations that are emerging from the home visit field. The Act wisely builds in key provisions, including national peer review of state applications, 10% set aside for training and technical assistance, and 3% set aside for evaluation with requirements for yearly performance tracking and reporting on key indicators and an ongoing independent national evaluation. These provisions for continuous improvement both increase the chances of successful implementation and will determine if home visiting is in fact achieving its intended short term outcomes.

As a quick look at the response to question 2 above shows (what it will take for home visitation to be ready for scale), the proposed requirements for state plans and use of funds all map onto the emerging consensus about what it will take to implement high quality voluntary early childhood home visit programs that offer a genuine and lasting return on investment. Those requirements include a needs and resource assessment, collaboration among home visit models and with other early childhood services, specification of outcome areas to be assessed and reported yearly, incentive to build in rigorous research designs, outreach to fathers and other caregivers, attention to staff training and supervision and organizational capacity for implementation, and the earmarked resources to strengthen Early Head Start home visitation. All of these help build programs that can enhance parenting and thus school readiness, and sustained family involvement in learning and development.

I respectfully propose several other considerations for this Bill to the Committee. First, my research and experience suggests that both the national models and many state administrators are ready to get and use their own and others' data and research to support an ongoing process of learning, evaluation, performance management, continuous improvement, and accountability. They are ready to become what David Garvin at Harvard Business School calls "learning organizations."¹⁷ The legislation now provides for substantial national as well as state level data collection and evaluation, but it does not specify how these data will be used to enhance implementation, learn from failures, benchmark, or share proven practices, in order to improve implementation as well as to inform policy-making. Consideration should be given to how to get

¹⁷ Garvin, D.A., Edmondson, A.C., & Gino, F. (2008), Is Yours a Learning Organization? *Harvard Business Review*, 86(3):109-116.

the maximum from the legislation's substantial investments in performance management and evaluation. Leadership at the national as well as state level, and provisions to support this learning process, are key, and perhaps could be specified as part of the legislation.

A second consideration involves a requirement for and specification of ways to link early childhood home visitation and other early childhood services to school such that both children and families are involved in a successful transition to kindergarten and elementary school. Evidence continues to grow that it is important to get parents as well as children ready for school, and that parental readiness offers academic benefits for children.¹⁸ Early childhood home visit programs are designed to enhance parent and family involvement in children's learning and development, and many of them reinforce the importance of continued involvement through the child's school career. There is also a substantial research base about the academic payoff of continued family involvement and increasing recognition of this amongst school administrators and teachers.¹⁹ However, the legislation as currently drafted does not include provisions for links with districts and schools in order to support and include both parents and children in the transition. Nor does the legislation as currently drafted consider how to work with schools to continue family involvement into and through elementary school.

Sustained family involvement with the academic payoffs it can bring is one of the longer-term outcomes from early childhood home visitation but it will depend on building bridges to school and working with educators to help sustain this involvement.

At the outset, I mentioned that my colleagues and I are working to build the knowledge base for complementary learning. Complementary learning involves linking school and non-school supports for children's learning and development from birth through high school and thereby creating pathways into and out of school. Initiatives such as the Harlem Children's Zone and Omaha's Building Bright Beginnings are examples of community-based complementary learning approaches and both emphasize the importance of support for parenting and family involvement. There is a strong research-based case that nurturing parenting and continued family involvement throughout a child's school career are necessary components of these complementary learning pathways. While increasing evidence suggests that no one support alone, whether it is a good prekindergarten, school or early childhood home visitation program, is enough to get children into and graduating from school, high quality early childhood home visitation holds much promise for launching both parent and child on a pathway to graduation, to postsecondary education, and to success in a global society and economy. The Education Begins at Home Act is structured to provide a great opportunity to offer a key component in this pathway hypothesis.

¹⁸ Kraft-Sayre, M. E., & Pianta, R. C. (2000), *Enhancing the transition to kindergarten: Linking children, families, and schools*. Charlottesville, VA: University of Virginia, National Center for Early Development & Learning; Kreider, H. (2002), *Getting parents "ready" for kindergarten: The role of early childhood education*, Cambridge, MA: Harvard Family Research Project; Schulting, A. B., Malone, P.S., & Dodge, K. A. (2005), The effect of school-based kindergarten transition policies and practices on child academic outcomes. *Developmental Psychology*, 41(6), 860–871; Schulting, A. (2008), Promoting Parent–School Relationships During the Transition to Kindergarten, *The Evaluation Exchange*, 14(1 &2): 8. Cambridge, MA: Harvard Family Research Project.

¹⁹ Harvard Family Research Project (2008). *The Evaluation Exchange: Building the Future of Family Involvement*, 14(1 &2): 8. Cambridge, MA: Author.