

Guest column: Home visiting program for mentoring at-risk families is a smart investment

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By Mary Jane Mapes and Gregory J. Turner

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Raising young children can be very challenging, even more so if you're young and inexperienced. Fortunately, thousands of families in Michigan have received support through voluntary home visiting programs that enable caring mentors to help young mothers and fathers understand their children's health needs, make their homes safer for kids, and respond to the stresses of parenting.

While the practice is obviously valuable for these young parents, as business leaders we see it as a solid investment as well. For example, children of mothers who participated in the Nurse-Family Partnership (NFP) were better prepared for preschool and kindergarten, half as likely to be abused or neglected, and half as likely to be convicted of a crime by age 19. Children who received high-quality home visiting and pre-kindergarten through another rigorously studied program known as the Abecedarian Project were four times more likely to earn a college degree and 42 percent more likely to be consistently employed by age 30. Equally interesting: participation in the NFP program alone produced average net savings of \$17,000 for every family served.



File photo: In 2009, Kalamazoo-area resident Grace Williams, center, her baby Jeremiah and Grace's mother Veronica Williams are visited by nurse Stacey Weesies, right, as part of the Nurse-Family Partnership. (MLive file photo)

Since its inception in 2010, Michigan has been awarded more than \$31 million for voluntary home visiting from the Maternal, Infant and Early Education Home Visiting (MIECHV) program. This funding

has gone to high-quality, evidence-based programs that enable nurses or other professionals to work with new and expectant parents during pregnancy and throughout the child's first two years of life. The programs have a parent-coaching component with community referrals that help families learn about child development and ways to improve the way their families function.

The MIECHV program is a great example of how federal dollars should be spent - 75 percent of funds must be used in support of models that have been proven by rigorous research to be effective. Up to 25 percent can be used on promising programs that have shown some good outcomes and are undergoing more rigorous evaluation.

Without an extension, the program ends on September 30, 2014. That would be highly unfortunate given the time and resources Michigan has devoted to creating an infrastructure to provide these crucial services in Berrien, Calhoun, Genesee, Ingham, Kalamazoo, Kent, Muskegon, Oakland, Saginaw, St. Clair, and Wayne Counties.

Fortunately in Washington, D.C., there is conversation about extending this program as part of the "doc fix" legislation related to the rates physicians are reimbursed under Medicare.

We believe that this is our best chance at seeing this program extended this year. The doc fix is supposed to be addressed by March 31, 2014. We urge our Members of Congress to ensure that the MIECHV program is extended without policy changes at level funding (\$400m per year) for whatever period of time is possible as part of this legislation.

It's a smart move for our kids, our community and our economy as well.

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