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EDUCATION BEGINS AT HOME ACT OF 2008

AUGUST 1, 2008.—Ordered to be printed

Mr. GEORGE MILLER of California, from the Committee on Education and Labor, submitted the following

R E P O R T

together with

MINORITY VIEWS

[To accompany H.R. 2343]

[Including cost estimate of the Congressional Budget Office]

The Committee on Education and Labor, to whom was referred the bill (H.R. 2343) to expand quality programs of early childhood home visitation that increase school readiness, child abuse and neglect prevention, and early identification of developmental and health delays, including potential mental health concerns, and for other purposes, having considered the same, report favorably thereon with an amendment and recommend that the bill as amended do pass.

The amendment is as follows:

Strike all after the enacting clause and insert the following:

SECTION 1. SHORT TITLE.

This Act may be cited as the "Education Begins at Home Act of 2008".

SEC. 2. FINDINGS AND PURPOSES.

(a) FINDINGS.—Congress finds that—

(1) the home is the first and most important learning environment for children, and parents are their children's first and most influential teacher;

(2) parent education and family support can promote parents' ability to enhance their children's development from birth until entry into kindergarten, thereby helping parents to prepare their children for success in school;

(3) undiagnosed and unaddressed developmental and health problems can impede overall child development and school readiness;

(4) all parents deserve and can benefit from—

(A) research-based information regarding child development;

(B) enrichment opportunities with their children; and

(C) early opportunities to become involved with their communities and schools; and

(5) early childhood home visitation leads to positive outcomes for children and families, including readiness for school, improved child health and development, positive parenting practices, and reductions in child maltreatment.

(b) PURPOSES.—The purposes of this Act are as follows:

(1) To enable States, Indian tribes, tribal organizations, territories, or possessions to deliver quality programs of early childhood home visitation to pregnant women and parents of children from birth until entry into kindergarten in order to promote positive outcomes for children and families including: readiness for school, improved child health and development, positive parenting practices, reductions in child maltreatment, and enhanced parenting abilities to support their children's optimal cognitive, language, social-emotional, and physical development.

(2) To expand quality programs of early childhood home visitation so as to more effectively reach and serve families with English language learners.

(3) To expand quality programs of early childhood home visitation so as to more effectively reach and serve families serving in the military.

(4) To establish a public education and awareness campaign concerning the importance of the proper care of infants and young children.

SEC. 3. DEFINITIONS.

In this Act:

(1) ELIGIBLE FAMILY.—The term "eligible family" means—

(A) a woman who is pregnant and the father of the child if the father is available; or

(B) a parent or primary caregiver of a child under the age of entry into kindergarten, including grandparents or other relatives of the child, and foster parents (including kinship caregivers), who are serving as the primary caregiver, including a noncustodial parent who has an on-going relationship with and, at times, provides physical care for such child.

(2) ENGLISH LANGUAGE LEARNER.—The term "English language learner", used with respect to an individual, means an individual—

(A) who—

(i) was not born in the United States or whose native language is a language other than English;

(ii)(I) is a Native American (as defined in section 9101 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7801)), an Alaska Native, or a native resident of an outlying area (as defined in such section 9101); and

(II) comes from an environment where a language other than English has had a significant impact on the individual's level of English language proficiency; or

(iii) is migratory, whose native language is a language other than English, and who comes from an environment where a language other than English is dominant; and

(B) whose difficulties in speaking or understanding the English language may be sufficient to deny such individual—

(i) the ability to successfully achieve in a classroom in which the language of instruction is English; or

(ii) the opportunity to participate fully in society.

(3) HOME VISITATION.—The term "home visitation" means services provided in the permanent or temporary residence, or in a mutually agreed upon location in the community, of the individual receiving such services.

(4) INDIAN TRIBE.—The term "Indian tribe" has the meaning given such term in section 4(e) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450b).

(5) SECRETARY.—Except as provided in section 6, the term "Secretary" means the Secretary of Health and Human Services.

(6) STATE.—The term "State" means each of the 50 States, the District of Columbia, and the Commonwealth of Puerto Rico.

(7) TERRITORIES AND POSSESSIONS.—The term "territories and possessions" shall include American Samoa, the Commonwealth of the Northern Mariana Islands, Guam, and the United States Virgin Islands.

(8) TRIBAL ORGANIZATION.—The term "tribal organization" has the meaning given the term in section 4(l) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450b).

SEC. 4. GRANTS FOR EARLY CHILDHOOD HOME VISITATION.

(a) AUTHORIZATION.—The Secretary, in consultation with the Secretary of Education, shall make grants to States, Indian tribes, tribal organizations, territories and possessions to enable States, Indian tribes, tribal organizations, territories and

possessions to establish or expand quality programs of early childhood home visitation as specified under subsection (e). Each grant shall consist of the allotment determined under subsection (b).

(b) DETERMINATION OF RESERVATIONS; AMOUNT OF ALLOTMENTS; AUTHORIZATION OF APPROPRIATIONS.—

(1) RESERVATIONS FROM APPROPRIATIONS.—From the total amount made available to carry out this section for a fiscal year, the Secretary shall reserve—

(A) 3 percent for an independent evaluation of the activities carried out under this Act, as specified in section 7;

(B) not more than 3 percent for Federal administrative costs;

(C) not more than 2 percent of the funds appropriated for any fiscal year for payments to Indian tribes or tribal organizations with an approved application under this section;

(D) not more than ½ of 1 percent of the funds appropriated for any fiscal year for payments to territories and possessions with an approved application under this section; and

(E) 2 percent for training and technical assistance for States.

(2) STATE ALLOTMENTS FOR EARLY CHILDHOOD HOME VISITATION.—

(A) IN GENERAL.—In accordance with subparagraph (B), the Secretary shall allot among each of the eligible States the total amount made available to carry out this section for any fiscal year and not reserved under paragraph (1), to support early childhood home visitation programs in accordance with this section.

(B) DETERMINATION OF STATE ALLOTMENTS.—The Secretary shall allot the amount made available under subparagraph (A) for a fiscal year among the eligible States in proportion to the number of children, aged from birth through 5 years from families whose income is below the poverty line, who reside within the State, compared to the number of such individuals who reside in all such States for that fiscal year.

(3) PAYMENTS TO TRIBES AND TERRITORIES.—

(A) Out of the funds reserved under paragraph (1)(C), the Secretary shall provide funds to each Indian tribe or tribal organization with an approved application under this section in accordance with the respective needs described in that application.

(B) Out of the funds reserved under paragraph (1)(D), the Secretary shall provide funds to each territory or possession with an approved application under this section in accordance with the respective needs described in that application.

(4) APPLICATIONS OF INDIAN TRIBES, TRIBAL ORGANIZATIONS, TERRITORIES, OR POSSESSIONS.—

(A) Subject to subparagraph (B), the Secretary shall approve an application of an Indian tribe, tribal organization, territory, or possession based on the quality of the application.

(B) The Secretary may exempt an application submitted by an Indian tribe, tribal organization, territory, or possession from any requirement of this section that the Secretary determines would be inappropriate to apply taking into account the resources, needs, and other circumstances of the Indian tribe, tribal organization territory, or possession with the exception of the provision of quality early childhood home visitation and participation in the independent evaluation outlined in section 7.

(5) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section $150,000,000 for fiscal year 2009 and such sums as may be necessary for fiscal years 2010 through 2013.

(c) GRANT APPLICATIONS.—A State, Indian tribe, tribal organization, territory, or possession that desires to receive a grant under this section shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require. For the purposes of this subsection, the term "State" includes Indian tribes, tribal organizations, territories, or possessions. The application shall contain the following information:

(1) An assurance that the Governor of the State has designated a lead State agency, such as the State educational agency or the State health and human services agency, to carry out the activities under this section.

(2) An assurance that the State will reserve 3 percent of such grant for evaluation and will participate in the independent evaluation under section 7.

(3) An assurance that the State will reserve 10 percent of the grant funds for training and technical assistance to programs of early childhood home visitation.

(4) An assurance that the State will authorize child care resource and referral agencies to refer parents seeking home visitation services.

(5) An assurance that in supporting early childhood home visitation programs under this section the State shall identify and prioritize serving communities that are in high need of such services, such as communities with—

(A) low student achievement;

(B) high rates of teen pregnancy;

(C) high proportions of low income families;

(D) high incidences of child abuse;

(E) high rates of children with developmental delays or disabilities;

(F) large concentrations of individuals who are English language learners;

(G) large concentrations of individuals currently serving in the Armed Forces; and

(H) large concentrations of individuals who formerly served in the Armed Forces.

(6) The results of a statewide needs assessment that describes—

(A) the quality and capacity of existing programs of early childhood home visitation in the State;

(B) the number and types of eligible families who are receiving services under such programs; and

(C) the gaps in early childhood home visitation in the State, including identification of communities that are in high need of such services.

(7) A State plan containing the following:

(A) A description of the State's plan to prioritize establishing or expanding high quality programs of early childhood home visitation programs in communities that are in high need of such programs.

(B) A description of the high quality programs of early childhood home visitation that will be supported by a grant under this section.

(C) A description of how the proposed program of early childhood home visitation will promote positive parenting skills and children's early learning and development.

(D) A description of how the proposed program of early childhood home visitation will incorporate the authorized activities described in subsection (e).

(E) How the lead State agency will build on and promote coordination among existing programs of early childhood home visitation in an effort to promote an array of home visitation programs to ensure more eligible families are being served and are getting the most appropriate services to meet their needs.

(F) How the lead State agency will promote collaboration among a broad range of child- and family-serving programs, including—

(i) early childhood home visitation programs, including targeted grants awarded under sections 5 and 6;

(ii) early childhood care and education programs;

(iii) activities carried out under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.) and section 619 of the Individuals with Disabilities Education Act (20 U.S.C. 1419);

(iv) child abuse prevention and treatment programs, and State and local child protection systems;

(v) Medicaid and State Children's Health Insurance programs;

(vi) nutrition assistance programs;

(vii) parental substance abuse and mental health prevention and treatment programs;

(viii) domestic and family violence prevention programs;

(ix) child support enforcement programs;

(x) workforce development programs;

(xi) the State Temporary Assistance to Needy Families program;

(xii) early childhood intervention programs, such as mental health prevention and treatment services;

(xiii) State and local educational agencies; and

(xiv) other appropriate child-serving programs in the State in order to facilitate the coordinated delivery of services for eligible families.

(G) How the lead State agency will provide for the training and technical assistance to programs of early childhood home visitation involved in activities under this section to more effectively meet the needs of the eligible families served, with sensitivity to cultural variations in attitudes toward formal support services and parenting norms.

(H) How the lead State agency will evaluate the activities supported under this section in order to assess outcomes including, but not limited to—

(i) parental outcomes related to child health and development, including parent knowledge of early learning and development;

(ii) child health, cognitive, language, social-emotional, and physical development;

(iii) child maltreatment;

(iv) school readiness; and

(v) links to community services.

(I) A description of how the lead State agency will ensure home visitation programs prioritize outreach activities to target fathers and include fathers in the program where safe and appropriate.

(J) A description of how the lead State agency will ensure that services are made available under the program to grandparents, other relatives or foster parents, of a child from birth through age 5 who serve as the primary caregiver of the child.

(K) Such other information as the Secretary may require.

(d) APPROVAL OF APPLICATIONS.—

(1) IN GENERAL.—The Secretary shall approve an application under this section based on the recommendations of a peer review panel, as described in paragraph (2).

(2) PEER REVIEW PANEL.—The peer review panel shall include individuals with experience in varying models of home visitation, including not fewer than—

(A) 3 individuals who are experts in the field of home visitation;

(B) 2 individuals who are experts in early childhood development;

(C) 1 individual with expertise implementing a statewide program of early childhood home visitation;

(D) 1 individual who is a board certified pediatrician or a developmental pediatrician; and

(E) 1 individual with experience in administering public or private (including community-based) child maltreatment prevention programs.

(3) RECOMMENDATIONS.—The panel shall recommend applicants to the Secretary based on the quality of their applications. In addition to ensuring that the application is complete, the panel shall consider—

(A) the quality of the statewide needs assessment, described in subsection (c)(6);

(B) the quality of the programs to be funded by the grant, described in subsection (c)(7)(B), and the capacity of such programs to establish or expand high quality home visitation services;

(C) the plan to enhance and improve services in the State through collaboration described in subsections (c)(7)(E) and (c)(7)(F);

(D) the State's plan to prioritize serving communities in high need of home visitation programs; and

(E) the State's plan for delivering effective training and technical assistance.

(e) STATE USES OF FUNDS.—Each State that receives a grant under this section shall—

(1) provide to as many eligible families in the State as practicable, voluntary early childhood home visitation, on not less frequently than a monthly basis with greater frequency of services for those eligible families identified with additional needs, through the implementation of high quality programs of early childhood home visitation that—

(A) adopt a clear, consistent model that—

(i) is research-based;

(ii) is grounded in empirically-based knowledge related to home visiting and child health or child development;

(iii) is linked to program-determined outcomes;

(iv) is associated with a national organization or institution of higher education (as defined under section 101 of the Higher Education Act of 1965), that has comprehensive home visitation program standards, including standardized training and on-going professional development, that ensure high quality service delivery and continuous program quality improvement;

(v) has been evaluated, and the results of the evaluation have been published in a peer-reviewed journal; and

(vi) has been in existence at least 3 consecutive years prior to the program being funded under this Act;

(B) employ well-trained and competent staff, as demonstrated by education or training, and the provision of ongoing and specific training on the model being delivered;

(C) maintain high quality supervision that supports home visitor competencies;

(D) show strong organizational capacity to implement the program involved;

(E) establish appropriate linkages and referral networks to other community resources and supports;

(F) monitor fidelity of program implementation to assure that services are delivered according to the specified model;

(G) establish procedures to promote participation of fathers, where safe and appropriate;

(H) are research-based and provide parents with—

(i) knowledge of age-appropriate child development in cognitive, language, social-emotional, and motor domains (including knowledge of second language acquisition, in the case of English language learners);

(ii) knowledge of realistic expectations of age-appropriate child behaviors;

(iii) knowledge of health and wellness issues for children and parents;

(iv) modeling, consulting, and coaching on parenting practices;

(v) skills to interact with their child to enhance age-appropriate development;

(vi) skills to recognize and seek help for issues related to health, developmental delays, and social, emotional, and behavioral skills;

(vii) activities designed to help parents become full partners in the education of their children; and

(viii) relevant information, consistent with State child welfare agency training, concerning child welfare and protective services resources if appropriate;

(I) ascertain what health and developmental services the family receives and works with providers of such services to eliminate gaps in service by offering annual health, vision, hearing, and developmental screening for children from birth to entry into kindergarten, when not otherwise provided;

(J) provide referrals for eligible families, as needed, to additional resources available in the community, such as center-based early education programs, child care services, health or mental health services, family literacy programs, employment agencies, social services, fatherhood programs, and child care resource and referral agencies; and

(K) offer group meetings (at program discretion) for eligible families that—

(i) further enhance the information, activities, and skill-building addressed during home visitation; and

(ii) offer opportunities for parents to meet with and support each other.

(2) reserve 10 percent of the grant funds to provide training and technical assistance, directly or through contract, to early childhood home visitation programs relating to—

(A) effective methods of implementing parent education, conducting home visiting, and promoting positive early childhood development;

(B) the relationship of health and well-being of pregnant women to prenatal and early childhood development;

(C) early childhood development with respect to children from birth until entry into kindergarten;

(D) methods to help parents promote emergent literacy, including second language acquisition for English language learners, in their children from birth until entry into kindergarten;

(E) health, vision, hearing, and developmental screenings;

(F) strategies for helping eligible families with special needs or those eligible families coping with crisis;

(G) recruiting, supervising, and retaining qualified staff;

(H) increasing services for underserved populations;

(I) methods to help parents effectively respond to their children's needs and behaviors;

(J) implementation of ongoing program quality improvement and evaluation of activities and outcomes;

(K) relevant issues related to child welfare and protective services, with information provided being consistent with State or local child welfare agency training;

(L) effective methods of successfully engaging fathers in programs for parents; and

(M) the relationship of father involvement to the health and well-being of pregnant women and to prenatal and early childhood development;

(3) ensure representatives from high quality programs of early childhood home visitation operating in the State are included in an existing State-level early childhood coordinating body, such as the State Advisory Council on Early Childhood Care and Education (as defined in section 642B(b) of the Head Start Act), that meets regularly to address policy and implementation issues that will improve the coordination and effectiveness of a range of services for children and families; and

(4) use not more than 5 percent of the amount of grant funds received under this section for the administration of the grant, including planning, administration, and annual reporting.

(f) MAINTENANCE OF EFFORT.—A State is entitled to receive its full allotment of funds under this section for any fiscal year if the Secretary finds that the aggregate expenditures within the State for quality programs of early childhood home visitation for the fiscal year preceding the fiscal year for which the determination is made was not less than 100 percent of such aggregate expenditures for the second fiscal year preceding the fiscal year for which the determination is made.

(g)(1) STATE MATCH.—In order to receive an allotment under subsection (b)(2), a State shall match the amount of such allotment with funds not derived from other Federal sources on the following basis:

(A) 10 percent of such allotment for fiscal year 2011;

(B) 20 percent of such allotment for fiscal year 2012; and

(C) 30 percent of such allotment for fiscal year 2013.

(2) MATCH REQUIREMENT.—The funds resulting from the requirement in paragraph (1) shall be exported in accordance with the requirements of this section.

(h) REPORTING REQUIREMENTS.—Each State that receives a grant under this section shall submit an annual report to the Secretary regarding the State's progress in addressing the purposes of this Act. Such report shall include, at a minimum, a description of—

(1) actual service delivery provided under the grant including—

(A) program characteristics, including descriptive information on the service model used and actual program performance;

(B) provider characteristics, including staff qualifications, work experience, and demographic characteristics; and

(C) recipient characteristics, including number, demographic characteristics, and family retention;

(2) recipient outcomes that are consistent with program goals, including, where appropriate given the program being evaluated—

(A) parent knowledge of early learning and development;

(B) child health, cognitive, language, social-emotional, and physical developmental indicators;

(C) child maltreatment indicators;

(D) school readiness indicators; and

(E) links to community services;

(3) the research-based instruction, materials, and activities being used in the activities funded under the grant;

(4) the training and technical assistance, including ongoing professional development, provided to programs supported under the grant;

(5) beginning at the end of the second year of the grant, the results of evaluations described in subsection (c)(7)(H); and

(6) the annual program implementation costs, including the cost per family served under the program.

SEC. 5. TARGETED GRANTS FOR EARLY CHILDHOOD HOME VISITATION FOR FAMILIES WITH ENGLISH LANGUAGE LEARNERS.

(a) IN GENERAL.—The Secretary, in consultation with the Secretary of Education, shall make grants, on a competitive basis, to eligible applicants to enable such applicants to support and expand local efforts to deliver services through quality programs of early childhood home visitation to eligible families with English language learners.

(b) ELIGIBLE APPLICANT.—In this section, the term "eligible applicant" means—

(1) 1 or more local educational agencies (as defined in section 9101 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7801)); and

(2) 1 or more public or private community-based organizations or agencies that serve eligible families and are capable of establishing and implementing high quality programs of early childhood home visitation.

(c) APPLICATIONS.—An eligible applicant that desires to receive a grant under this section shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require. The application shall include a description of—

(1) the results of a communitywide needs assessment that demonstrates the need for services to eligible families with English language learners and describes—

(A) community demographics;

(B) the quality and capacity of existing programs of early childhood home visitation for eligible families with English language learners in the community;

(C) the gaps in programs of early childhood home visitation for eligible families with English language learners in the community; and

(D) the type of program of early childhood home visitation necessary to address the gaps identified;

(2) the program of early childhood home visitation that will be supported by the grant under this section;

(3) how the proposed program of early childhood home visitation will promote positive parenting skills and children's early learning and development;

(4) how the proposed program of early childhood home visitation will incorporate the authorized activities described in subsection (e);

(5) how services provided through a grant under this section will use materials that are appropriate for eligible families with English language learners;

(6) how the activities under this section will build on and promote coordination among existing programs of early childhood home visitation, if such programs exist in the community, in an effort to promote an array of home visitation that ensures more eligible families with English language learners are being served and are getting the most appropriate services to meet their needs;

(7) how the program will ensure that—

(A) where appropriate to the program goals of the home visiting model, families participating in early childhood home visitation programs with English language learners will be introduced to and connected with their local schools to encourage ongoing parental involvement in their children's education; and

(B) the activities under this section will support the preparation of children for school;

(8) how channels of communication will be established between staff of programs of early childhood home visitation and staff of other early childhood education programs, such as Head Start programs carried out under the Head Start Act (42 U.S.C. 9831 et seq.) and Early Head Start programs carried out under section 645A of such Act, preschool programs, and child care programs, to facilitate the coordination of services for eligible families with English language learners;

(9) how eligible families with English language learners will be recruited and retained to receive services under this section;

(10) how training and technical assistance will be provided to help the staff of programs of early childhood home visitation involved in activities under this section to more effectively serve eligible families with English language learners;

(11) how the eligible applicant will evaluate the activities supported under this section in order to demonstrate outcomes related to the—

(A) number of eligible families with English language learners served by programs of early childhood home visitation;

(B) parental knowledge of early learning and development;

(C) positive parenting practices related to early learning and development; and

(D) children's cognitive, language, social-emotional, and physical development;

(12) how the proposed program will conduct outreach activities to target both mothers and fathers and increase father involvement where safe and appropriate; and

(13) such other information as the Secretary may require.

(d) APPROVAL OF APPLICATIONS.—

(1) IN GENERAL.—The Secretary shall select applicants for funding under this section based on the quality of the applications and the recommendations of a peer review panel, as described in paragraph (2).

(2) PEER REVIEW PANEL.—The peer review panel shall include not fewer than—

(A) 2 individuals who are experts in the field of home visitation;

(B) 2 individuals who are experts in early childhood development;

(C) 2 individuals who are experts in serving eligible families with English language learners;

(D) 1 individual who is a board certified pediatrician or a developmental pediatrician; and

(E) 1 individual with expertise in administering public or private (including community-based) child maltreatment prevention programs.

(e) AUTHORIZED ACTIVITIES.—Each eligible applicant that receives a grant under this section shall carry out the following activities:

(1) Providing to as many eligible families with English language learners as practicable, voluntary early childhood home visitation, on not less frequently than a monthly basis, through the implementation of quality programs of early childhood home visitation that are research-based that provide parents with—

(A) knowledge of age-appropriate child development in cognitive, language, social-emotional, and motor domains;

(B) knowledge of realistic expectations of age-appropriate child behaviors;

(C) knowledge of health and wellness issues for children and parents;

(D) modeling, consulting, and coaching on parenting practices;

(E) skills to interact with their child to enhance age-appropriate development;

(F) skills to recognize and seek help for issues related to health, developmental delays, and social, emotional, and behavioral skills; and

(G) activities designed to help parents become full partners in the education of their children.

(2) Ascertaining what health and developmental services the family receives and working with these providers to eliminate gaps in service by offering annual health, vision, hearing, and developmental screening for children from birth to entry into kindergarten, when not otherwise provided.

(3) Providing referrals for participating eligible families with English language learners, as needed, to additional resources available in the community, such as center-based early education programs, child care services, health or mental health services, family literacy programs, employment agencies, social services, and child care resource and referral agencies.

(4) Offering group meetings (at program discretion), on not less frequently than a monthly basis, for eligible families with English language learners that—

(A) further enhance the information, activities, and skill-building addressed during home visitation;

(B) offer opportunities for parents to meet with and support each other; and

(C) address challenges facing eligible families with English language learners.

(5) Providing training and technical assistance to early childhood home visitation staff relating to—

(A) effective service to eligible families with English language learners, including skills to address challenges facing English language learners;

(B) effective methods of implementing parent education, conducting home visiting, and promoting quality early childhood development, with sensitivity to cultural variations in parenting norms and attitudes toward formal support services;

(C) the relationship of health and well-being of pregnant women to prenatal and early child development;

(D) early childhood development with respect to children from birth until entry into kindergarten;

(E) methods to help parents promote emergent literacy in their children from birth until entry into kindergarten;

(F) implementing strategies for helping eligible families with English language learners coping with a crisis;

(G) recruiting, supervising, and retaining qualified staff;

(H) increasing services for underserved eligible families with English language learners;

(I) methods to help parents effectively respond to their children's needs and behaviors;

(J) implementation of ongoing program quality improvement and evaluation of activities and outcomes; and

(K) the relationship of father involvement to the health and well-being of pregnant women and to prenatal and early childhood development.

(6) Coordinating existing programs of early childhood home visitation in order to effectively and efficiently meet the needs of more eligible families with English language learners.

(f) REPORTING REQUIREMENTS.—Each applicant that receives a grant under this section to carry out a program shall submit an annual report to the Secretary, and the lead State agency as described in section 4(c)(1), regarding the progress of such program in addressing the purposes of this Act. Such report shall include, at a minimum, a description of—

(1) actual service delivery provided under the grant including—

(A) program characteristics including descriptive information on the service model used and actual program performance;

(B) provider characteristics including staff qualifications, work experience, and demographic characteristics;

(C) recipient characteristics including number, demographic characteristics, and rates of family retention in programs; and

(D) an estimate of annual program implementation costs;

(2) recipient outcomes that are consistent with program goals including, where appropriate given the program being evaluated—

(A) parental practices;

(B) child health and development indicators;

(C) child maltreatment indicators;

(D) school readiness indicators; and

(E) links to community services;

(3) the research-based instruction, materials, and activities being used in the activities funded under the grant; and

(4) the training and technical assistance, including ongoing professional development, provided to programs supported under the grant.

(g) SUPPLEMENT NOT SUPPLANT.—Grant funds provided under this section shall be used to supplement, and not supplant, Federal and non-Federal funds available for carrying out the activities described in this section.

(h) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section $20,000,000 for fiscal year 2009 and such sums for fiscal years 2010 through 2013.

SEC. 6. TARGETED GRANTS FOR EARLY CHILDHOOD HOME VISITATION FOR MILITARY FAMILIES.

(a) IN GENERAL.—The Secretary of Defense, in consultation with the Secretary of Education and the Secretary of Health and Human Services, shall make grants, on a competitive basis, to eligible applicants to enable such applicants to support and expand efforts to deliver services through high quality programs of early childhood home visitation to eligible families with a family member in the Armed Forces.

(b) ELIGIBLE APPLICANT.—In this section, the term "eligible applicant" means any of the following:

(1) A local educational agency that receives payments under title VIII of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7701 et seq.).

(2) A school of the defense dependents' education system under the Defense Dependents' Education Act of 1978 (20 U.S.C. 921 et seq.).

(3) A school established under section 2164 of title 10, United States Code.

(4) A community-based organization serving families with a family member in the Armed Forces.

(c) APPLICATIONS.—An eligible applicant that desires to receive a grant under this section shall submit an application to the Secretary of Defense at such time, in such manner, and containing such information as the Secretary of Defense may require. The application shall include a description of—

(1) the results of a communitywide needs assessment that demonstrates the need for services to eligible families with a family member in the Armed Forces and describes—

(A) community demographics;

(B) the quality and capacity of existing programs of early childhood home visitation for eligible families with a family member in the Armed Forces;

(C) the gaps in programs of early childhood home visitation for eligible families with a family member in the Armed Forces; and

(D) the type of program of early childhood home visitation necessary to address the gaps identified;

(2) the program of early childhood home visitation that will be supported by the grant under this section;

(3) how the proposed program of early childhood home visitation will promote positive parenting skills and children's early learning and development;

(4) how the proposed program of early childhood home visitation will incorporate the authorized activities described in subsection (f);

(5) how services provided through a grant under this section will use materials that are appropriate toward eligible families with a family member in the Armed Forces;

(6) how the activities under this section will build on and promote coordination with existing programs of early childhood home visitation, if such programs exist in the community, in an effort to promote an array of home visitation that ensures more eligible families with a family member in the Armed Forces are being served and are getting the most appropriate services to meet their needs;

(7) how the program will ensure that—

(A) where appropriate to the program goals of the home visiting model, families participating in early childhood home visitation programs with a family member in the Armed Forces will be introduced to and connected with their local schools to encourage ongoing parental involvement in their children's education; and

(B) the activities under this section will support the preparation of children for school;

(8) how channels of communication will be established between staff of programs of early childhood home visitation and staff of other early childhood education programs, such as Head Start programs carried out under the Head Start Act (42 U.S.C. 9831 et seq.) and Early Head Start programs carried out under section 645A of such Act, preschool programs, family support programs, and child care programs, to facilitate the coordination of services for eligible families with a family member in the Armed Forces;

(9) how eligible families with a family member in the Armed Forces will be recruited and retained to receive services under this section;

(10) how training and technical assistance will be provided to help programs of early childhood home visitation involved in activities under this section to more effectively serve eligible families with a family member in the Armed Forces;

(11) how the eligible applicant will evaluate the activities supported under this section in order to demonstrate outcomes related to the—

(A) number of eligible families with a family member in the Armed Forces served by programs of early childhood home visitation;

(B) parental knowledge of early learning and development;

(C) positive parenting practices related to early learning and development; and

(D) children's cognitive, language, social-emotional, and physical development;

(12) how the proposed program will conduct outreach activities to target both mothers and fathers and increase father involvement where safe and appropriate; and

(13) such other information as the Secretary of Defense may require.

(d) APPROVAL OF LOCAL APPLICATIONS.—

(1) IN GENERAL.—The Secretary of Defense shall select applicants for funding under this section based on the quality of the applications and the recommendations of a peer review panel, as described in paragraph (2).

(2) PEER REVIEW PANEL.—The peer review panel shall include not fewer than—

(A) 2 individuals who are experts in the field of home visitation;

(B) 2 individuals who are experts in early childhood development;

(C) 2 individuals who are experts in family support for military families;

(D) 1 individual who is a board certified pediatrician or developmental pediatrician; and

(E) 1 individual with expertise in administering public or private (including community-based) child maltreatment prevention programs.

(e) AUTHORIZED ACTIVITIES.—Each eligible applicant that receives a grant under this section shall carry out the following activities:

(1) Providing to as many eligible families with a family member in the Armed Forces as practicable, voluntary early childhood home visitation, on not less frequently than a monthly basis, through the implementation of quality programs of early childhood home visitation that are research-based and that provide parents with—

(A) knowledge of age-appropriate child development in cognitive, language, social-emotional, and motor domains;

(B) knowledge of realistic expectations of age-appropriate child behaviors;

(C) knowledge of health and wellness issues for children and parents;

(D) modeling, consulting, and coaching on parenting practices;

(E) skills to interact with their child to enhance age-appropriate development;

(F) skills to recognize and seek help for issues related to health, developmental delays, and social, emotional, and behavioral skills; and

(G) activities designed to help parents become full partners in the education of their children.

(2) Ascertaining what health and developmental services the family receives and working with these providers to eliminate gaps in service by offering annual health, vision, hearing, and developmental screening for children from birth to entry into kindergarten, when not otherwise provided.

(3) Providing referrals for participating eligible families with a family member in the Armed Forces, as needed, to additional resources available in the community, such as center-based early education programs, child care services, health or mental health services, family literacy programs, employment agencies, social services, and child care resource and referral agencies.

(4) Offering group meetings (at program discretion), on not less frequently than a monthly basis, for eligible families with a family member in the Armed Forces that—

(A) further enhance the information, activities, and skill-building addressed during home visitation;

(B) offer opportunities for parents to meet with and support each other; and

(C) address challenges facing eligible families with a family member in the Armed Forces.

(5) Providing training and technical assistance to early childhood home visitation staff relating to—

(A) effective service to eligible families with a family member in the Armed Forces;

(B) effective methods of implementing parent education, conducting home visiting, and promoting quality early childhood development, with sensitivity to cultural variations in parenting norms and attitudes toward formal support services;

(C) the relationship of health and well-being of pregnant women to prenatal and early child development;

(D) early childhood development with respect to children from birth until entry into kindergarten;

(E) methods to help parents promote emergent literacy in their children from birth until entry into kindergarten;

(F) implementing strategies for helping eligible families with a family member in the Armed Forces coping with crisis;

(G) recruiting, supervising, and retaining qualified staff;

(H) increasing services for underserved eligible families with a family member in the Armed Forces;

(I) methods to help parents effectively respond to their children's needs and behaviors;

(J) implementation of ongoing program quality improvement and evaluation of activities and outcomes; and

(K) the relationship of father involvement to the health and well-being of pregnant women and to prenatal and early childhood development.

(6) Coordinating existing programs of early childhood home visitation in order to effectively and efficiently meet the needs of more eligible families with a family member in the Armed Forces.

(f) REPORTING REQUIREMENTS.—Each applicant that receives a grant under this section to carry out a program shall submit an annual report to the Secretary, and the lead State agency as described in section 4(c)(1), regarding the progress of such program in addressing the purposes of this Act. Such report shall include, at a minimum, a description of—

(1) actual service delivery provided under the grant including—

(A) program characteristics including descriptive information on the service model used and actual program performance;

(B) provider characteristics including staff qualifications, work experience, and demographic characteristics;

(C) recipient characteristics including number, demographic characteristics, and family retention; and

(D) an estimate of annual program implementation costs;

(2) recipient outcomes that are consistent with program goals including, where appropriate given the program being evaluated—

(A) parental practices;

(B) child health and development indicators;

(C) child maltreatment indicators;

(D) school readiness indicators; and

(E) links to community services;

(3) the research-based instruction, materials, and activities being used in the activities funded under the grant; and

(4) the training and technical assistance, including ongoing professional development, provided to programs supported under the grant.

(g) SUPPLEMENT NOT SUPPLANT.—Grant funds provided under this section shall be used to supplement, and not supplant, Federal and non-Federal funds available for carrying out the activities described in this section.

(h) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section $20,000,000 for fiscal year 2009 and such sums as may be necessary for fiscal years 2010 through 2013.

SEC. 7. EVALUATION.

(a) IN GENERAL.—From funds reserved under section 4(b)(1)(A), the Secretary shall conduct, through grant or contract, an independent evaluation of the effectiveness of home visitation programs carried out under this Act.

(b) REPORTS.—

(1) INTERIM REPORT.—Not later than 2 years after the date of enactment of this Act, the Secretary shall submit an interim report on the evaluation conducted pursuant to subsection (a) to the Committee on Health, Education, Labor, and Pensions of the Senate and the Committee on Education and Labor of the House of Representatives.

(2) FINAL REPORT.—Not later than 4 years after the date of enactment of this Act, the Secretary shall submit a final report on the evaluation conducted pursuant to subsection (a) to the committees described in paragraph (1).

(c) STUDY.—The independent evaluation conducted under this section shall examine the following:

(1) The effect of home visiting programs on child and parent outcomes, consistent with program goals, including, where appropriate given the program being evaluated, parental outcomes related to child health and development, parenting practices, child health and development, child maltreatment, school readiness, and links to community services.

(2) The effectiveness of early childhood home visitation on different populations, including the extent to which variability exists in program ability to improve outcomes across programs and populations.

SEC. 8. REPORTS TO CONGRESS.

(a) IN GENERAL.—The Secretary shall annually provide a report to the Committee on Education and Labor in the House of Representatives and the Committee on Health, Education, Labor, and Pensions in the Senate, information on the activities carried out under this Act.

(b) CONTENT.—The reports submitted under this section shall, at a minimum, include information about the programs carried out under this Act, including information on the following:

(1) descriptions of the high need communities targeted by States for programs carried out under this Act;

(2) the service delivery models funded under this Act;

(3) program characteristics, including—

(A) staff qualifications and demographic characteristics; and

(B) recipient characteristics including the number of families served, the demographic characteristics of the families served, and family retention and duration of services;

(4) program-reported outcomes;

(5) the findings from State evaluations;

(6) the research-based instruction, materials, and activities being used in the activities funded under the grant;

(7) the training and technical activities, including on-going professional development, provided to programs; and

(8) the annual program implementation costs, including the cost per family served under the program.

SEC. 9. SUPPORTING NEW PARENTS THROUGH HOSPITAL EDUCATION.

(a) IN GENERAL.—The Secretary shall develop and implement a public information and educational campaign to inform the public and new parents about the importance of proper care for infants and children under 5 years of age, including healthy parent-child relationships, the demands and stress associated with caring for infants, positive responses to infants' challenging behaviors including awareness of their social, emotional, and physical needs, awareness of the vulnerability of young children to abusive practices, and the signs and treatment of post-partum depression.

(b) ELEMENTS.—

(1) IN GENERAL.—The campaign developed under subsection (a) shall include the following elements:

(A) The dissemination of educational and informational materials in print, audio, video, electronic, and other media.

(B) The use of public service announcements and advertisements.

(C) The dissemination of effective child abuse prevention practices and techniques, including information about research-based home visiting programs, respite care, crisis nurseries, and parent support networks, to parents, caregivers, maternity hospitals, children's hospitals, pediatricians, child care centers, organizations providing prenatal and postnatal care, and organizations providing parenting education and support services.

(D) Connection to existing parental involvement programs.

(2) EXISTING PROGRAMS.—The Secretary, in implementing and executing the public information and educational campaign under this section, should seek collaboration with and referrals to existing parental involvement programs that specialize in strengthening children's cognitive skills, early literacy skills, social or emotional and physical development and existing prenatal and early childhood home visitation programs.

(3) EXISTING STATE REQUIREMENTS.—The Secretary, in implementing and executing the public information and educational campaign under this section, shall consider with pre-existing State requirements to ensure that no unnecessary burdens are placed on hospitals, military hospitals, and birth centers receiving educational materials.

(c) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section such sums as may be necessary for fiscal years 2009 through 2013.

I. PURPOSE

The purpose of H.R. 2343, the "Education Begins at Home Act of 2008," is to enable states, Indian tribes, tribal organizations, territories and possessions to deliver high quality programs of early childhood home visitation in order to promote positive outcomes for children and families by improving readiness for school, child health and development and positive parenting practices, and by reducing child maltreatment.

II. COMMITTEE ACTION

110TH CONGRESS

Full Committee hearing on "H.R. 2343—Education Begins At Home Act"

On Wednesday June 11, 2008, the Committee on Education and Labor held a hearing in Washington, D.C. entitled "H.R. 2343—Education Begins At Home Act." The hearing reviewed the research on home visitation programs, the components necessary for implementing high quality programs, and the prevention benefits of home visitation programs. Witnesses spoke in favor of H.R. 2343 and highlighted how the legislation supports high quality programs. Testifying before the Full Committee were Heather Weiss, Ed.D., Founder and Director of the Harvard Family Research Project and Senior Research Associate and Lecturer at the Harvard Graduate School of Education; Laura A. Ditka, Esq., Allegheny County Deputy District Attorney and Chief of the Child Abuse Unit; Julie Fenley, mother of two children and military spouse and a participant in a home visiting program for military families; Makeda London, Program Manager, Healthy Families Program in Chicago, IL; William A. Estrada, Esq., Director of Federal Relations for Home School Legal Defense Association; and, Jeanne

Smart, R.N., M.S.N., Director, Nurse-Family Partnership, Los Angeles County.

Legislative action

On May 16, 2007, Representatives Danny Davis (D–IL) and Todd Platts (R–PA) introduced H.R. 2343, the "Education Begins at Home Act." The bill authorizes $400 million over three years for the Secretary of Health and Human Services (HHS) to allot grants for programs of early childhood home visitation on a formula basis to states, Indian tribes, tribal organizations, territories, and possessions. To receive funds, states and other eligible entities must demonstrate how they will support activities that will improve parental practices, child health and development, school readiness, and links to community services, and how they will lessen child mistreatment. States also must demonstrate that funds are used for programs with strong organizational capacities that employ well-trained staff. H.R. 2343 identifies the critical elements of quality home visitation programs, while allowing states to select specific service models that reflect the quality elements. The Secretary of HHS and states must each set-aside specified funds for evaluations of programs. In addition, the bill authorizes $50 million over three years for competitive grants for early childhood home visitation programs for limited-English proficient families and another $50 million over three years for such services for military families.

Full Committee Markup of H.R. 2343

On Wednesday, June 18, 2008 and Thursday, June 19, 2008, the Committee on Education and Labor considered H.R. 2343 in legislative session and reported the bill favorably, as amended, to the House of Representatives by voice vote. The Committee adopted the following amendments:

1. An amendment in the nature of a substitute offered by Chairman Miller (D–CA) was adopted by voice vote. The amendment in the nature of a substitute contained minor technical changes and the following modifications to H.R. 2343:

- Changes a $400 million authorization for fiscal years 2008–2010 to a five-year authorization period with $150 million allotted for fiscal year 2009 and such sums thereafter.
- Changes a $50 million authorization for fiscal years 2008–2010 for military families to a five-year authorization period with $20 million allotted for fiscal year 2009 and such sums thereafter.
- Changes a $50 million authorization for fiscal years 2008–2010 for English language learners to a five-year authorization period with $20 million allotted for fiscal year 2009 and such sums thereafter.
- Requires states and other eligible entities to identify and prioritize serving communities in high need of home visitation services, such as communities with low student achievement, high rates of teen pregnancy, high proportions of low income families, high incidences of child abuse, high volumes of children with developmental delays or disabilities, large concentrations of individuals currently serving in the Armed Forces, and large concentrations of individuals who formerly served in the Armed Forces.

• Changes the formula to states from the proportion of children under age five to the proportion of children under age five from families with incomes below the poverty line.

• Requires that programs funded under the Act adopt a home visiting model that is (1) research-based and grounded in knowledge related to home visiting and child health or child development, (2) linked to program-determined outcomes, (3) associated with an organization or institution that has comprehensive standards, including standardized training and on-going professional development, that has been evaluated and had results published in a peer-reviewed journal, and that has been in existence at least three years prior to being funded under the Act.

• Adds a state match of ten percent in fiscal year 2011, twenty percent in fiscal year 2012, and thirty percent in fiscal year 2013.

• Strikes changes to the Early Head Start program.

• Strikes the requirement that hospitals offer parenting classes to new parents.

2. An amendment offered by Representative Hinojosa (D–TX), was adopted by voice vote. The amendment improves the coordination of services to children and families with English language learners.

The Committee rejected two amendments by rollcall vote. An amendment offered by Representative Souder (R–IN) was defeated by rollcall vote of 17–24, and an amendment offered by Representative Kuhl (R–NY) was defeated by rollcall vote of 17–25.

III. SUMMARY OF THE BILL

Purpose

The purpose of H.R. 2343, the Education Begins at Home Act of 2008, is to expand access to high quality home visitation programs for young children and their families in order to help support and strengthen families, increase school readiness and improve academic achievement, and decrease the incidence of child abuse and neglect.

Grants for Early Childhood Home Visitation

H.R. 2343 authorizes $150 million in fiscal year 2009 and such sums as necessary for fiscal year 2010 through fiscal year 2013 for the Secretary of Health and Human Services (HHS), in consultation with the Secretary of Education, to allot grants to states, Indian tribes, tribal organizations, territories, and possessions for funding early childhood home visitation programs. State plans are approved through a peer review process and funds are distributed based upon the proportion of children under age five from families residing in the state whose incomes are below the poverty line. Three percent of funds may be used for federal administrative costs, two percent of funds are reserved for payments to Indian tribes or tribal organizations, and no more than .5 percent are reserved for payments to territories and possessions. Additionally, funds are reserved for an independent evaluation and training and technical assistance for states.

To be eligible to receive funds under this bill, a state must submit an application that includes the results of a statewide needs assessment regarding home visitation services in the state; provide

an assurance that the state will reserve ten percent of funds to provide training and technical assistance to home visitation programs and three percent of funds for evaluations of home visitation programs; submit a state plan with information on the home visitation programs to be funded under the Act; submit information on how the lead state agency will promote collaboration among a broad range of child- and family-serving programs and other information. The state must also provide an assurance that the state will identify and prioritize serving communities that are in high need of home visitation services, such as communities with low student achievement, high rates of teen pregnancy, high proportions of low income families, high incidences of child abuse, high volumes of children with developmental delays or disabilities, large concentrations of individuals currently serving in the Armed Forces, and large concentrations of individuals who formerly served in the Armed Forces.

In addition to using specified funds for evaluation and training and technical assistance, states shall use the funds provided under this Act to offer voluntary early childhood home visitation services to eligible families not less frequently than on a monthly basis. An eligible family includes a woman who is pregnant and the father of the child, and a parent or primary caregiver of a child under the age of entry into kindergarten. Primary caregivers may include foster parents, grandparents or other relatives of the child.

H.R. 2343 also authorizes twenty million dollars in fiscal year 2009 and such sums as may be necessary for fiscal year 2010 through fiscal year 2013 for the Secretary of HHS, in consultation with the Secretary of Education, to fund through a competitive process, programs serving eligible families with English language learners. Applications are approved through a peer review process.

Twenty million dollars are additionally authorized in fiscal year 2009 and such sums as may be necessary for fiscal year 2010 through fiscal year 2013 for the Secretary of Defense, in consultation with the Secretary of Education and the Secretary of HHS, to fund through a competitive process, programs serving eligible families with a family member in the Armed Forces. Applications are approved through a peer review process.

Evaluation

H.R. 2343 requires program evaluation by the Secretary of HHS and by states receiving funds. The bill requires three percent of funds be reserved for the Secretary to conduct an independent evaluation of the effectiveness of the home visitation programs carried out under the Act. No later than two years after the date of enactment of H.R. 2343, the Secretary of HHS must submit to the Committee on Education and Labor of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate, an interim report on the evaluation. A final report on the evaluation must be submitted to these Committees no later than four years after the date of enactment of H.R. 2343. In addition, states must reserve three percent of funds for evaluations of the programs funded under this Act. Finally, local programs are required to use home visiting models linked to program-determined outcomes.

Public Awareness Campaign

The bill authorizes such sums as may be necessary for the Secretary of HHS to implement a public information and educational campaign to inform the public and new parents about the importance of the first five years of life.

IV. COMMITTEE VIEWS

The Committee believes investing in our nation's children during their first years of life is critical to helping them arrive at school healthy and ready to succeed. H.R. 2343 reflects an important investment that will not only serve to strengthen families but will ultimately save taxpayer money by reducing the need for child welfare services and special education services and by decreasing the rate of school failure. Parents are children's first and most important teachers and helping parents support their children's development is essential.

Research on brain and child development demonstrates that children's experiences in the first five years of life have a lasting impact on their health, learning, and behavior. Approximately eighty-five percent of brain growth occurs in the first three years of life. In these early years of life, infant and toddler brains create 700 new synapses per second. Synapses determine which neurons are activated in the brain, essentially affecting what the brain knows and what it can do. Neurons that are frequently activated by experiences and interactions are strengthened and those that do not get activated actually die or are "pruned."[1] So, in fact, children's experiences both positive and negative actually change brain architecture and brain chemistry.[2] For example, one study found that infants whose mothers spoke to them more frequently knew almost 300 more words by age two than children who were not spoken to as frequently.[3] Conversely, exposure to chronic stress stimulates chemicals in the brain that limit the health and growth of synapses and negatively affect child health and behavior.[4] For example, children who are abused and neglected develop physical and mental health problems.[5] The Committee concludes that supporting healthy childhood experiences and reducing detrimental experiences are the best way to support early childhood development and provide children with the building blocks they need to succeed in school and in life. The relationship that forms between a parent and a child in these early years is vital to a child's learning and behavior.

Early Childhood Home Visitation Programs

The Committee believes the high quality early childhood home visitation programs authorized under H.R. 2343 provide a proven and cost-effective method for supporting parents' helping children, and strengthening families. Investment in these types of programs supports brain and child development and fosters healthy parent-child relationships. These voluntary programs provide parents and pregnant women with education and supportive services to help them better understand the learning and developmental needs of their children, build long-lasting positive parent-child bonds, and reduce family and parenting stress. The Committee understands that quality home visiting programs often link families to a variety

of community services, including adult and family literacy programs, child care services, early education programs, child care resource and referral agencies, early intervention programs, child abuse prevention and treatment programs, health and mental health services, nutrition services, substance abuse treatment services, domestic and family violence prevention programs, employment agencies, fatherhood programs, income support programs, English as a Second Language services, and schools. Home visitation program activities are designed to promote positive outcomes for children and families in the areas of school-readiness, improved child health and development, positive parenting practices, reductions in child mistreatment, and parents' ability to support their children's social-emotional, cognitive, language, and physical development. Different program models target different types of families, ranging from first-time teen mothers to families, regardless of income, with children in a specific age group. These programs typically provide services anywhere from a two- to a five-year period.

At least thirty-seven states support home visiting programs. Yet, because of inadequate funding, only a small fraction of families who would benefit from such services are able to receive them.[6] There is currently no dedicated federal funding stream for early childhood home visitation programs. Local programs are funded through a combination of state, local, private, and federal funds, such as the Child Abuse and Prevention Treatment Act (CAPTA), Early Head Start, Elementary and Secondary Education Act (ESEA), and Temporary Assistance for Needy Families (TANF). The Committee believes that a dedicated federal funding stream for home visitation programs would allow more families to receive these important services, reduce child abuse, and improve children's achievement in school.

Child Maltreatment

Child abuse and neglect is a significant problem that can represent a toxic stress to brain and human development and have long-term consequences for children who suffer from abuse. According to the Department of Health and Human Services, an estimated 905,000 children were victims of maltreatment in fiscal year 2006.[7] The youngest children have the highest rate of victimization. For children age birth to one year, the rate of child victimization was 24.4 per 1,000 children. The victimization rate was 14.2 per 1,000 children for children between age one and three, and the victimization rate was 13.5 per 1,000 children for children between four and seven years of age.[8]

The long-term effects of child abuse are far reaching and may include a higher risk for health and social problems as adults, for example, alcoholism, depression, drug abuse, eating disorders, obesity, sexual promiscuity, smoking, suicide, and certain chronic diseases.[9] Furthermore, child abuse and neglect can have long-term economic and societal costs through increased use of the juvenile and adult criminal justice systems, the increased health care costs resulting from mental illness, substance abuse, and domestic violence, and the loss of economic productivity due to unemployment and underemployment. A 2007 report by Prevent Child Abuse America, estimated the annual cost to the United States of child abuse and neglect at approximately 104 billion dollars.[10]

In 2006, approximately 83 percent of victims were abused by a parent acting alone or in concert with another.[11] Some of the factors associated with parents who abuse or neglect their children, include physical and mental health problems, low cognitive functioning, lack of knowledge of child development and parenting skills, parental history of child abuse as a child, socio-economic status, job and marital situation, low self-esteem and feeling isolated, parent-child interaction, characteristics of the child, and one's attitude toward children and violence.[12]

The Committee believes funding effective programs proven to reduce child abuse and neglect is a moral imperative. Early childhood home visitation programs provide a method for doing just that. This view of home visitation programs is shared by Joan E. Ohl, Commissioner for Children, Youth and Families at the Department of Health and Human Services.[13] By working closely with families at risk for child abuse, home visitation programs reduce parent stress, improve parenting techniques, and ultimately decrease incidents of child abuse.

School Readiness

Children's experiences prior to school entry have a lasting effect on learning and school success. Children who enter school behind their peers have great difficulty catching up and, on average, tend to stay behind their peers.[14] The achievement gap in elementary and secondary school between low income students and their more advantaged peers begins before kindergarten.[15] With nearly 12 million children under the age of five spending significant time in child care settings, efforts to improve the quality of child care and other early learning settings are critical to closing the achievement gap. Efforts to support the home environment so that families have the tools they need to help their children reach kindergarten healthy and ready to succeed are just as essential. Research demonstrates that home visitation programs are an effective method for supporting parents in their desire to educate their children.

Research on Models of Home Visitation

The Committee is keenly aware of the significant body of research surrounding high quality home visitation models. Such models are built upon extensive research on child development that demonstrates how influential parents and the home environment are to children's school achievement, mental health, and behavior. Children's early school achievement and literacy development are rooted in early adult-child communication and patterns of interaction.[16] Family risk factors and family stress have short and long term effects on youth and adolescents.[17] Home visitation programs aim to increase positive parenting practices, reduce harmful ones, and decrease family stress.

Empirical evaluations of early childhood home visiting conclusively demonstrate its positive effect on children and families. Though some home visitation models target different populations and may aim to influence distinct child and family outcomes, there is research demonstrating the effectiveness of each of the major national home visitation program models: Early Head Start, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Parent-Child Home Program, Parents as Teachers, and

Nurse-Family Partnership. A meta-analysis of sixty studies on home visiting programs found such programs had a positive effect on children's cognitive and socio-emotional development, improved parenting practices and maternal education, and aided in the prevention of child abuse.[18] Another meta-analysis that included more recent studies also found a decrease in reports of abuse to child protective services and on child injuries.[19] For example, children whose families participate in home visitation programs show improved school performance and behavior at kindergarten entry and through the sixth grade, lower high school dropout rates and higher graduation rates.[20] Participation in home visitation programs decreases emergency room visits, and programs targeted to high-risk pregnant teenagers can cut incidences of child abuse nearly in half.[21] Home visiting programs also lead to more positive health outcomes for mothers, increased intervals between births, less use of welfare and food stamps, and increased father involvement.[22]

Cost Benefits

Investing in effective intervention programs in early childhood yields high economic benefits.[23] Money invested in high quality home visitation programs reduces later costs to society. For example, community-based services to overburdened families are far less costly than the costs of child protective services, law enforcement, courts, foster care, health care, and the treatment of adults recovering from abuse.[24] A report by Washington State found a return of a minimum of $2.88 for every dollar invested in the Nurse-Family Partnership program, with a return of $5.70 for higher risk populations. The government achieves saving by lowering costs for health care, child protection, education, criminal justice, mental health, and government assistance.[25] A study by the RAND Corporation found cost benefits to a number of home visitation models.[26] Therefore, the Committee views investment in high quality home visitation programs to be not only good education, welfare, and health policy, but strong fiscal policy as well.

Targeting Services

Home visiting programs may target specific at-risk populations and can sometimes provide a universal approach to service delivery. Local communities make different decisions about which type of model to use, with some localities choosing to provide a universal approach in order to decrease potential stigmatization or to screen families to determine the need for more intensive services. Universal approaches have clear benefits. In a 1995 report, the U.S. Advisory Board on Child Abuse and Neglect recommended a voluntary universal home visiting approach that reaches all families as an effective fatality prevention strategy.[27] Research on universal models of home visiting finds that the school readiness of children from non-poor families is improved by participation in home visitation programs.[28] Parent involvement in children's education is also increased by universal home visitation programs.[29] Moreover, home visitation programs promote early identification of developmental disabilities that occur in children regardless of socioeconomic level. However, given limited resources available for these programs, the Committee also recognizes the need to target resources to high need communities.

The Committee believes that H.R. 2343 strikes the right balance by targeting funds to high need communities while allowing states and local programs the flexibility to determine what type of model and approach best meets the needs of families within those communities. H.R. 2343 defines eligible families as those with a woman who is pregnant and the father of the child, if available, or a parent or primary caregiver of a child under the age of entry into kindergarten, including grandparents, foster parents, or other relatives of the child who serves as the primary caregiver of the child. H.R. 2343 requires states to identify and prioritize communities in high need of home visiting services, such as those with low student achievement, high rates of teen pregnancy, high proportions of low income families, high incidences of child abuse, high rates of children with developmental delays or disabilities, large concentrations of individuals who are English language learners, large concentrations of individuals currently serving in the Armed Forces, and large concentrations of individuals who formerly served in the Armed Forces. The bill also trusts the states and local programs to determine how to best serve the families in targeted communities. The Committee believes this flexibility is critical as it will allow local programs to evaluate an individual family's needs and make a determination based on those needs. For example, a local program could use a family needs assessment to determine that the risk of child abuse within a specific family was greater for a different family who had slightly less income. Similarly, the bill will provide programs with the discretion to determine that the family with income over the poverty line and struggling to raise a child with autism was in greater need of services than the family with income under the poverty line who is still doing well. This approach allows rural areas, which often find service delivery a challenge because of the stigma perceived by potential clients, to use a combined universal and targeted approach. In the end, this combined approach will lead to families in high need communities being more engaged in programs and programs being more successful. Again, given the limited resources available for such programs, the Committee believes these funds should be appropriately targeted. However, the Committee finds that an approach that specifically limits services to families under the federal poverty line may undermine the ability of states and local programs to best target these funds to children at-risk.

Program Quality and Accountability

The Committee believes strong accountability is critical when funding a new federal program. H.R. 2343 includes numerous provisions to ensure funds will be spent appropriately and effectively. For example, the Committee intends that only programs using proven research-based home visitation models should receive funds under this Act. Research indicates that high quality and effective programs share key characteristics. These include having evaluation components that connect specific program elements to specific outcomes; providing services long enough that a positive relationship between parents and the service provider can be established; employing well-trained and competent staff who follow a standardized curriculum; implementing high quality supervision and ongoing professional development; having strong organizational ca-

pacity; and, providing linkages to other community resources and supports.[30] The bill requires states to fund only programs that meet these specific criteria and programs that adopt a clear and consistent model of home visitation that is research-based, grounded in empirically-based knowledge related to home visiting and child health or development; linked to program-determined outcomes; associated with a national organization or institution of higher education that has comprehensive home visitation standards; and has been in existence at least three years and has been evaluated, with the results of the evaluation published in a peer-reviewed journal. This approach allows states to choose the specific home visiting programs that meet the needs of their communities, and will ensure that funds will go only to programs using a model proven to be effective and designed to ensure standardized training and on-going professional development that will ensure high quality service delivery and continuous program improvement. The Committee intends that the training of all home visitors draws on practices based in evidence and theory to the maximum extent practicable. For example, there are a variety of programs that train home visitors using research-based strategies to develop caregivers' child-rearing skills in order to lower the likelihood of abuse or neglect and prepare children for school success.

Moreover, H.R. 2343 requires state applications to be reviewed by a qualified panel of experts. Because the funds authorized in this bill represent a large investment, it is important that states demonstrate the capacity to use the funds wisely and effectively.

The Committee recognizes that multiple professionals could serve as experts on childhood development, including psychologists or social workers with expertise in early child development and early childhood educators. The Committee believes the peer review panel will help ensure that objective and thorough consideration is given to each application.

H.R. 2343 prioritizes program evaluation to ensure funds are spent effectively and that Congress, the Department of Health and Human Services, states, and local programs have the information they need to make wise funding decisions and program improvements. In addition to requiring local programs to use models that track program-determined outcomes, the bill requires the Department of Health and Human Services to set-aside funds to conduct an independent evaluation of the activities carried out by the bill. The bill also requires states to set aside funding to conduct evaluations of the programs they fund under the bill. The Committee believes evaluation of these programs will enhance program accountability and ensure that high quality programs receive funding.

The Committee supports the focus on training and technical assistance in H.R. 2343 as it will improve program quality. The established national models of home visitation provide on-going training and technical assistance to local programs. Training and technical assistance activities support professional development, program improvement, and adherence to program standards and curriculum. By requiring set-asides for training and technical assistance, H.R. 2343 promotes program quality and integrity.

English Language Learners

English language learners (ELL) are a growing subgroup of children in America and are at substantial risk for academic problems. The number of ELL children enrolled in schools in the United States has increased substantially in the past decade. During the 2004–2005 academic year, there were an estimated 5.1 million ELL students enrolled in public pre-kindergarten, elementary, and secondary schools—a fifty-six percent increase since the 1994–1995 school year.[31] However, there is a larger share of ELL students in the lower grades, with approximately 52.6 percent enrolled in grades preK-five and 47.4 percent enrolled in grades six to twelve.[32] Based on the 2005 National Assessment for Educational Progress, only twenty-nine percent of ELL eighth-grade students scored at or above the basic achievement level for mathematics. Only twenty-nine percent of ELL eighth graders scored at or above the basic achievement level for reading. Furthermore, Hispanic ELL students are less likely to complete high school than Hispanics who are fluent in English.[33] Given these risks and the unique language development needs of ELL children and families, the Committee believes a competitive grant program targeted toward serving these children and their families is warranted. The Committee maintains that this will help ELL children arrive at school with better developed English language and literacy skills that will better prepare them to succeed in school.

During Committee consideration of H.R. 2343, the minority offered an amendment to prohibit services to undocumented immigrant families. This amendment would have actually denied services to children who are United States citizens. The amendment was soundly defeated. Unfortunately, the proponents of this amendment rely upon the false impression that large numbers of ELL children are undocumented. To the contrary, research indicates that over ninety percent of children under age five of immigrants are United States citizens.[34] It has also been shown that children of immigrants are at risk for slower cognitive and language development, as well as poor academic performance.[35] The Committee is greatly concerned about any amendment that would deny services to children who are United States citizens.

Military families

Military families are experiencing many new and significant challenges, including multiple and extended deployments and the return of injured and disabled parents. These challenges, characterized by uncertainty, separation, and sometimes the loss of a parent or spouse, can create high levels of stress for children and their parents.[36] Common conditions experienced by military families, such as geographic isolation and frequent and long separations, can be difficult for children. In pre-deployment periods, infants have been found to be fussy and change their eating habits. Preschoolers sometimes react by displaying tantrums, sadness, changes in eating patterns, and anxiety. Post- deployment concerns include the possibility of an increased risk of child abuse, especially for families with services members experiencing combat-related stress, post-traumatic stress disorder, or both. Recognizing the unique demands of military service and the need to support military families, the Congress provided appropriations for the Department of Defense to

fund early childhood home visitation programs for military families. This has provided support to families on twelve military bases but has not been sufficient funding to provide services to all families who may seek these services.

The Committee greatly appreciates the effort and sacrifice of our Armed Forces and their families and strongly believes every effort should be made to support these families. Providing premiere health and mental health care to our active servicemen and women and our veterans is paramount. In addition, providing services such as home visitation programs, that can decrease family stress, assist with separations and reunions, and support parents and children, represent a key method of supporting military families and ensuring those parents have the tools they need to support healthy child development.

H.R. 2343 addresses this need by authorizing $20 million for fiscal year 2009 and such sums thereafter through fiscal year 2013 for home visiting programs for military families.

V. SECTION-BY-SECTION ANALYSIS

Section 1. Short title

Cites the short title as the "Education Begins at Home Act of 2008."

Section 2. Findings and purposes

Sets forth findings and the purpose of the bill.

Section 3. Definitions

Sets forth definitions for the terms "eligible family," "English language learner," "home visitation," "Indian tribe," "Secretary," "State," "Territories and possessions," and "tribal organization."

Section 4. Grants for Early Childhood Home Visitation

Authorizes $150,000,000 for fiscal year 2009 and such sums as may be necessary for fiscal years 2010 through 2013 for the Secretary of Health and Human Services (HHS), in consultation with the Secretary of Education, to make grants to States, Indian tribes, tribal organizations, territories and possessions to establish or expand high quality programs of early childhood home visitation. Includes specific reservations for an independent evaluation, Federal administrative costs, payments to Indian tribes or tribal organizations, payments to territories and possessions, and training and technical assistance for States. State allotments are determined by formula.

Includes requirements regarding the contents of state grant applications. Specifies the composition of a peer review panel to be convened to make recommendations to the Secretary regarding the approval of applications and the criteria which the panel shall consider when reviewing applicants. Includes the allow use of funds for states, including a reservation of 10 percent for providing training and technical assistance to early childhood home visitation programs and a cap of 5 percent for administrative purposes.

Requires that states receiving funds under the Act maintain their aggregate expenditures within the State for early childhood home visitation, and additionally requires a state match of 10 per-

cent in fiscal year 2011, 20 percent in fiscal year 2012, and 30 percent in fiscal year 2013. Includes annual State reporting requirements to the Secretary.

Section 5. Targeted grants for Early Childhood Home Visitation for Families with English Language Learners

Authorizes $20,000,000 for fiscal year 2009 and such sums as may be necessary for fiscal years 2010 through 2013 for the Secretary of Health and Human Services, in consultation with the Secretary of Education, to make grants on a competitive basis to support and expand delivery of high quality early childhood home visitation programs to eligible families with English language learners. Defines eligible applicants and the requirements for applications by such entities. Specifies the process for peer review of grant applications. Includes an allowable use of funds and reporting requirements for grant recipients. Requires that grant funds supplement and not supplant Federal and non-Federal funds.

Section 6. Targeted grants for Early Childhood Home Visitation for Military Families

Authorizes $20,000,000 for fiscal year 2009 and such sums as may be necessary for fiscal years 2010 through 2013 for the Secretary of Defense, in consultation with the Secretary of HHS and the Secretary of Education, to make grants on a competitive basis to support and expand delivery of high quality early childhood home visitation programs to eligible families with a family member in the Armed Forces. Defines eligible applicants and the requirements for applications by such entities. Specifies the process for peer review of grant applications. Includes an allowable use of funds and reporting requirements for grant recipients. Requires that grant funds supplement and not supplant Federal and non-Federal funds.

Section 7. Evaluation

Requires the Secretary to conduct, through grant or contract, an independent evaluation of the effectiveness of home visitation programs carried out under the Act. Specifies a timeline for the Secretary to submit to Congress an interim report and a final report on the evaluation.

Section 8. Reports to Congress

Requires the Secretary to annually report to Congress on the activities carried out under the Act and specifies what information must be included in such reports.

Section 9. Supporting New Parents Through Hospital Education

Authorizes such sums as may be necessary for fiscal years 2009 through 2013 for the Secretary to carry out a public information and educational campaign to inform the public and new parents about the importance of proper care for infants and children under 5 years of age.

VI. EXPLANATION OF AMENDMENTS

The Amendment in the Nature of a Substitute, as amended, is explained in the body of this report.

VII. APPLICATION OF LAW TO THE LEGISLATIVE BRANCH

Section 102(b)(3) of Public Law 104–1, the Congressional Accountability Act, requires a description of the application of this bill to the legislative branch. H.R. 2343 authorizes early childhood home visitation programs. The bill has no direct impact on legislative branch employees.

VIII. UNFUNDED MANDATE STATEMENT

Section 423 of the Congressional Budget and Impoundment Control Act (as amended by Section 101(a)(2) of the Unfunded Mandates Reform Act, P.L. 104–4) requires a statement of whether the provisions of the reported bill include unfunded mandates. H.R. 2343 contains no intergovernmental or private-sector mandates as defined by the Unfunded Mandates Reform Act (UMRA).

IX. EARMARK STATEMENT

H.R. 2343 does not contain any congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clauses 9(d), 9(e) or 9(f) of rule XXI of the Rules of the House of Representatives.

X. ROLL CALL

COMMITTEE ON EDUCATION AND LABOR

ROLL CALL: 1 **BILL: H.R. 2343** **DATE: 6/18/2008**
AMENDMENT NUMBER: 2 **FAILED: 17 AYES / 24 NOES**
SPONSOR/AMENDMENT: SOUDER / PRIORITIVE SERVICES FOR LOW-INCOME PARTICIPANTS

MEMBER	AYE	NO	PRESENT	NOT VOTING
Mr. MILLER, Chairman		X		
Mr. KILDEE, Vice Chairman		X		
Mr. PAYNE				X
Mr. ANDREWS		X		
Mr. SCOTT		X		
Ms. WOOLSEY		X		
Mr. HINOJOSA		X		
Mrs. McCARTHY		X		
Mr. TIERNEY		X		
Mr. KUCINICH		X		
Mr. WU				X
Mr. HOLT		X		
Mrs. SUSAN DAVIS		X		
Mr. DANNY DAVIS		X		
Mr. GRIJALVA		X		
Mr. TIMOTHY BISHOP		X		
Ms. SANCHEZ		X		
Mr. SARBANES		X		
Mr. SESTAK		X		
Mr. LOEBSACK		X		
Ms. HIRONO		X		
Mr. ALTMIRE		X		
Mr. YARMUTH				X
Mr. HARE		X		
Ms. CLARKE		X		
Mr. COURTNEY		X		
Ms. SHEA-PORTER		X		
Mr. McKEON	X			
Mr. PETRI	X			
Mr. HOEKSTRA	X			
Mr. CASTLE	X			
Mr. SOUDER	X			
Mr. EHLERS	X			
Mrs. BIGGERT	X			
Mr. PLATTS	X			
Mr. KELLER	X			
Mr. WILSON	X			
Mr. KLINE	X			
Mrs. McMORRIS RODGERS				X
Mr. MARCHANT				X
Mr. PRICE	X			
Mr. FORTUÑO	X			
Mr. BOUSTANY	X			
Mrs. FOXX	X			
Mr. KUHL	X			
Mr. ROB BISHOP				X
Mr. DAVID DAVIS	X			
Mr. WALBERG				X
[vacancy]				
TOTALS	**17**	**24**		**7**

COMMITTEE ON EDUCATION AND LABOR

ROLL CALL: 2 BILL: H.R. 2343 DATE: 6/18/2008
AMENDMENT NUMBER: 4 FAILED: 17 AYES / 25 NOES
SPONSOR/AMENDMENT: KUHL / LEGAL RESIDENTS' PARTICIPATION IN HOME VISITATION PROGRAMS (LIMIT TO U.S. CITIZENS, PERMANENT RESIDENTS)

MEMBER	AYE	NO	PRESENT	NOT VOTING
Mr. MILLER, Chairman		X		
Mr. KILDEE, Vice Chairman		X		
Mr. PAYNE				X
Mr. ANDREWS		X		
Mr. SCOTT		X		
Ms. WOOLSEY		X		
Mr. HINOJOSA		X		
Mrs. McCARTHY		X		
Mr. TIERNEY		X		
Mr. KUCINICH		X		
Mr. WU		X		
Mr. HOLT		X		
Mrs. SUSAN DAVIS		X		
Mr. DANNY DAVIS		X		
Mr. GRIJALVA		X		
Mr. TIMOTHY BISHOP		X		
Ms. SANCHEZ		X		
Mr. SARBANES		X		
Mr. SESTAK		X		
Mr. LOEBSACK		X		
Ms. HIRONO		X		
Mr. ALTMIRE	X			
Mr. YARMUTH				X
Mr. HARE		X		
Ms. CLARKE		X		
Mr. COURTNEY		X		
Ms. SHEA-PORTER		X		
Mr. McKEON	X			
Mr. PETRI	X			
Mr. HOEKSTRA	X			
Mr. CASTLE	X			
Mr. SOUDER	X			
Mr. EHLERS	X			
Mrs. BIGGERT	X			
Mr. PLATTS	X			
Mr. KELLER	X			
Mr. WILSON	X			
Mr. KLINE	X			
Mrs. McMORRIS RODGERS				X
Mr. MARCHANT				X
Mr. PRICE	X			
Mr. FORTUÑO		X		
Mr. BOUSTANY	X			
Mrs. FOXX	X			
Mr. KUHL	X			
Mr. ROB BISHOP				X
Mr. DAVID DAVIS	X			
Mr. WALBERG				X
[vacancy]				
TOTALS	**17**	**25**		**6**

XI. STATEMENT OF OVERSIGHT FINDINGS AND RECOMMENDATIONS OF THE COMMITTEE

In compliance with clause 3(c)(1) of rule XIII and clause 2(b)(1) of rule X of the Rules of the House of Representatives, the Committee advises that the Committee's oversight findings and recommendations are reflected in the body of this report.

XII. NEW BUDGET AUTHORITY AND CBO COST ESTIMATE

With respect to the requirements of clause 3(c)(2) of rule XIII of the Rules of the House of Representatives and section 308(a) of the Congressional Budget Act of 1974 and with respect to requirements of 3(c)(3) of rule XIII of the Rules of the House of Representatives and section 402 of the Congressional Budget Act of 1974, the Committee has received the following estimate for H.R. 2343 from the Director of the Congressional Budget Office:

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, July 8, 2008.

Hon. GEORGE MILLER,
Chairman, Committee on Education and Labor,
House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 2343, the Education Begins at Home Act of 2008.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Jonathan Morancy.

Sincerely,

ROBERT A. SUNSHINE
(For Peter R. Orszag, Director).

Enclosure.

H.R. 2343. Education Begins at Home Act of 2008

Summary: H.R. 2343 would authorize the appropriation of $190 million for 2009 and such sums as may be necessary for each year from 2010 through 2013 for grants to provide home visitation services during early childhood. In addition, the bill would authorize the appropriation of such sums as may be necessary for fiscal years 2009 through 2013 to provide a public information and educational campaign regarding proper care for children under five years of age.

CBO estimates that implementing the bill would cost $57 million in 2009 and $767 million over the 2009–2013 period, assuming the appropriation of the necessary amounts. Enacting H.R. 2343 would not affect direct spending or revenues.

H.R. 2343 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA); any costs to state, local, or tribal governments would be incurred voluntarily.

Estimated cost to the Federal Government: The estimated budgetary impact of H.R. 2343 is shown in the following table. The costs of this legislation fall within budget functions 050 (national defense) and 500 (education, training, employment, and social services).

	By fiscal year, in millions of dollars—					
	2009	2010	2011	2012	2013	2009–2013
CHANGES IN SPENDING SUBJECT TO APPROPRIATION						
Early Childhood Home Visitation:						
Estimated Authorization Level	150	153	156	159	162	780
Estimated Outlays	45	90	153	156	159	603
Early Childhood Home Visitation—English Language Learners:						
Estimated Authorization Level	20	20	21	21	22	104
Estimated Outlays	6	12	20	21	21	80
Early Childhood Home Visitation—Military Families:						
Estimated Authorization Level	20	20	21	21	22	104
Estimated Outlays	6	12	20	21	21	80
Public Information and Education Campaign:						
Estimated Authorization Level	1	1	1	1	1	5
Estimated Outlays	*	1	1	1	1	4
Total Changes						
Estimated Authorization Level	191	194	199	202	207	993
Estimated Outlays	57	115	194	199	202	767

Note.—* = less than $500,000.

Basis of estimate: For this estimate, CBO assumes that H.R. 2343 will be enacted near the end of fiscal year 2008, the authorized amounts will be appropriated by the beginning of each fiscal year, and outlays will follow historical spending patterns.

The bill would authorize appropriations for three programs to provide home visitation services during early childhood and would increase spending by $763 million over the 2009–2013 period, assuming appropriation of the estimated amounts. For each of those programs, the bill would authorize a specific amount for 2009 and such sums as may be necessary for the years 2010–2013. CBO assumes that the amount authorized for 2009 would be adjusted for inflation for each year through 2013. Specifically H.R. 2343 would:

• Authorize the appropriation of $150 million for 2009 for grants to provide visitation services to all families. CBO estimates that implementing this program would increase discretionary costs by $603 million over the 2009–2013 period.

• Authorize the appropriation of $20 million for 2009 for grants to provide visitation services targeted to families with individuals learning English. CBO estimates that implementing this program would increase discretionary costs by $80 million over the 2009–2013 period.

• Authorize the appropriation of $20 million for 2009 for grants to provide visitation services targeted to military families. CBO estimates that implementing this program would increase discretionary costs by $80 million over the 2009–2013 period.

Finally, the bill would authorize such sums as may be necessary for fiscal years 2009 through 2013 to provide a public education campaign designed to teach new parents about the importance of proper care for children under five years of age. CBO estimates that this provision would cost $4 million over the 2009–2013 period, assuming the availability of appropriated funds.

Estimated impact on state, local, and tribal governments: H.R. 2343 contains no intergovernmental or private-sector mandates as defined in UMRA. Grant funds authorized in the bill would benefit state, local, and tribal governments that provide home visitation services to families with young children. Any costs those governments incur to comply with grant requirements, including pro-

viding matching funds or submitting reports, would be incurred voluntarily.

Estimate prepared by: Federal Costs: Jonathan Morancy. Impact on State, Local, and Tribal Governments: Lisa Ramirez-Branum. Impact on the Private Sector: Patrick Bernhardt.

Estimate approved by: Keith Fontenot, Deputy Assistant Director for Health and Human Resources, Budget Analysis Division.

XIII. STATEMENT OF GENERAL PERFORMANCE GOALS AND OBJECTIVES

In accordance with clause 3(c) of rule XIII of the House of Representatives, the goal of H.R. 2343 is to provide states, Indian tribes, tribal organizations, territories and possessions authority and funding, through the Secretary of Health and Human Services, to deliver high quality programs of early childhood home visitation. The Committee expects the Department of Health and Human Services to comply with H.R. 2343 and implement the changes to the law in accordance with these stated goals.

XIV. CONSTITUTIONAL AUTHORITY STATEMENT

Under clause 3(d)(1) of rule XIII of the House of Representatives, the Committee must include a statement citing the specific powers granted to Congress in the Constitution to enact the law proposed by H.R. 2343. The Committee believes that the amendments made by this bill are within Congress' authority under Article I, section 8, clause 18 of the U.S. Constitution.

XV. COMMITTEE ESTIMATE

Clause 3(d)(2) of rule XIII of the House of Representatives requires an estimate and a comparison of the costs that would be incurred in carrying out H.R. 2343. However, clause 3(d)(3)(B) of that rule provides that this requirement does not apply when the Committee has included in its report a timely submitted cost estimate of the bill prepared by the Director of the Congressional Budget Office under section 402 of the Congressional Budget Act.

XVI. CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

None.

XVII. COMMITTEE CORRESPONENCE

None.

ENDNOTES

[1] Testimony of Deborah Philips, Hearing, U.S. House of Representatives, Committee on Education and Labor, Investing in Early Education: Paths to Improving Children's Success, January 23, 2008.

[2] Presentation by Pat Levitt, Ph.D, Director, Vanderbilt Kennedy Center for Research on Human Development, U.S. House of Representatives, National Summit on America's Children ("National Summit"), Washington D.C., May 22, 2007.

[3] Huttenlocher, J., Haight, W., Bryk, A., Seltzer, M., & Lyons, T. (1991). Early vocabulary growth: Relation to language input and gender. Developmental Psychology, 27, 236–248.

[4] See Presentation by Megan Gunnar, Ph.D., Regents Professor and Distinguished McKnight University Professor, Institute of Child Development, University of Minnesota, U.S. House of Representatives, National Summit; see also Friedman, R.J & Chase-Lansdale, P.L. (2001), Chronic adversities, in M. Rutter and E. Taylor (Eds.), Child and Adolescent Psychiatry: Modern Approaches, 4th Edition. Blackwell Scientific Publications.

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[12] Felitti V, Anda R, Nordenberg D, Williamson D, Spitz A, Edwards V, et al. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. American Journal of Preventive Medicine, 14(4):245–58; Runyan D, Wattam C, Ikeda R, Hassan F, Ramiro L. Child abuse and neglect by parents and other caregivers, in Krug E, Dahlberg LL, Mercy JA, Zwi AB, Lozano R, editors. World Report on Violence and Health. Geneva, Switzerland: World Health Organization; 2002. p. 59–86. Available from URL: *www.who.int/violence_injury_prevention/violence/global_campaign/en/chap3.pdf*

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[25] Testimony of Michelle Ridge, Hearing, U.S. House of Representatives Subcommittee on Education Reform, September 27, 2006.

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see also Testimony of Heather B. Weiss, Hearing, U.S. House of Representatives Committee on Education and Labor, H.R. 2343, The Education Begins at Home Act, June 11, 2008.

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[35] See, e.g., Fry, R. (2003). Hispanic Youth Dropping Out of U.S. Schools: Measuring the Challenge. Washington, DC: Pew Hispanic Center; Calderon, M. (2007). Buenos Principios: Latino Children in the Earliest Years of Life (Washington, DC: National Council of La Raza), iv, available at *http://www.nclr.org/content/publications/download/45609*

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MINORITY VIEWS

Republican Members of the Committee on Education and Labor believe that parents play an essential role in a child's development. Committee Republicans understand that home visitation programs can increase school readiness and promote positive parenting practices. Further, home visitation assists in child abuse and neglect prevention and in the early identification of developmental and health delays. While Committee Democrats worked to come to a compromise on the bill's language for markup, Committee Republicans believe there is still work to be done to strengthen the language. We are concerned that the only two amendments offered by Republicans were rejected, even though they would have strengthened the bill.

CHANGES FROM THE INTRODUCED BILL TO THE MARKUP SUBSTITUTE

During the Committee markup of H.R. 2343, Chairman George Miller (D–CA) offered an Amendment in the Nature of a Substitute that made several essential changes to the introduced bill. Most importantly, in order to ensure that the most disadvantaged families are taken into consideration, the amendment included changes to the funding formula to be based on the number of children aged birth to 5 years from families whose income is below the poverty line. Additionally, a provision that required States to provide an assurance that they will prioritize serving communities that are in high need of services was included.

The Substitute also made a handful of other changes to the introduced bill that Republicans believe will help make the legislation stronger. This includes changing the structure of the authorization of appropriations to span 5 years; authorizing $150 million for the first year of the State grant program and $20 million each for the first year of the English language learner and military family targeted programs; and requiring programs receiving funding to adopt a clear, consistent model that is research based, linked to program determined outcomes, and has been in existence at least 3 years. The Substitute also ensured that representatives from home visitation programs are included in an existing State level early childhood coordinating body such as the State Advisory Council on Early Childhood Care and Education as defined in Head Start (striking the original requirement for the coordinating body to include a variety of representatives from child welfare programs, child health insurance programs, food stamp programs, etc.). The Substitute included a State match requirement beginning in Fiscal Year 2011 at 10 percent growing to a match of 30 percent in Fiscal Year 2013. Finally, the Substitute removed language requiring parents to sign a written waiver if they do not wish to participate in a parent training class.

TARGETING PROGRAMS TO THOSE MOST IN NEED AND ENSURING ONLY LEGAL U.S. RESIDENTS AND CITIZENS CAN PARTICIPATE IN THE FEDERALLY FUNDED PROGRAM

Unfortunately, the two Republican amendments offered during the Committee markup were not accepted. Committee Republicans believe that these amendments would have made the bill a great deal stronger.

Congressman Mark Souder (R–IN) offered an amendment to prioritize services for low-income participants at or below the poverty level. As introduced, the bill does not contain a requirement that States and other eligible entities ensure program participants are the most economically disadvantaged citizens. The Souder amendment simply asked States applying for home visitation grants from the Federal government to provide assurances that low-income families would be given priority for participation as well as those communities in high need of home visitation services, to the extent feasible. Committee Republicans agree that local communities are the best judge of those in need of services within the community, and that's why the Souder amendment was crafted deliberately as a priority for the funding, while still maintaining flexibility at the local level. However, we believe that Federal funds must be used to serve those in greatest need first; without a priority for serving those who are most disadvantaged, Republicans believe there is a danger that funds could be siphoned away by higher income communities who may be more savvy and able to access services without Federal assistance. This amendment provided flexibility for programs to serve other participants in need of services, as long as priority was first given to those low-income families in need of services. This amendment was defeated on a party line vote.

Congressman Randy Kuhl (R–NY) offered an amendment to ensure that only legal residents are allowed to receive the benefit of Federally-funded home visitation programs. The bill as currently drafted defines an eligible family as a woman who is pregnant and the father of the child, or a parent or primary caregiver of a child prior to entry into kindergarten. While Committee Democrats argue that this amendment would deny services to children who are United States citizens, it is clear to Committee Republicans that services provided for in this legislation are to and for parents. These services may in some way benefit children but the services are not education services provided directly to children but rather social services offered to parents and, therefore, this amendment would not have denied any services to U.S. citizens. There is no restriction or requirement in that definition that program participants be legal residents or U.S. citizens. The Kuhl amendment would have ensured that only individuals who are legal residents or citizens of the United States could take part in this program as defined by the term "eligible family" in the bill. Committee Republicans do not believe that individuals who enter the United States illegally should be able to participate in supplemental programs funded with Federal tax dollars. We believe that this bill must be clarified to ensure that this country's limited Federal funds are used to serve only those who are in this country legally. Unfortu-

nately, this amendment was not accepted by the Committee; it failed by a vote of 17 to 25.

CONCLUSION

Committee Republicans appreciate that Committee Democrats were willing to work in a bipartisan fashion on this legislation. While the Substitute was an improvement, it was not perfect. And so, Committee Republicans look forward to a continued dialogue as this bill moves through the legislative process. It is always dangerous when the Federal government seeks to take on the role of the parent; thus, we must guard closely against Federal overreaching. The emphasis of this legislation should not be on replacing parental responsibility or involvement, but on supporting those parents in need and encouraging positive family development. This legislation will benefit from more stringent targeting for our most disadvantaged citizens and assurances that only legal residents and citizens of the United States can partake in these new Federally-funded programs.

BUCK MCKEON.
CATHY MCMORRIS RODGERS.
KENNY MARCHANT.
MARK SOUDER.
C. W. BOUSTANY, Jr.
RANDY KUHL.
TODD R. PLATTS.
RIC KELLER.
DAVID DAVIS.
JOE WILSON.
TIM WALBERG.
JOHN KLINE.

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