Home is where the heart is: The Role of Voluntary Home Visitation Programs in Ensuring Fair Equality of Opportunity for Families

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Abstract

Children from low-income families come to the first day of kindergarten developmentally behind. While education policy has worked to mitigate this disparity, early education programs are not enough to promote true equality of opportunity for children. However, voluntary home visiting programs have proven useful in promoting the capabilities of both parents and children, and policy should be committed to these programs as viable solutions to developmental inequalities. "The great events of this world are not battles and elections and earthquakes and thunderbolts. The great events are babies, for each child comes with the message that God is not yet discouraged with humanity, but is still expecting goodwill to become incarnate in each human life."

--Anonymous

"Awareness that babes in arms have very different life chances depending on the wealth, class, or race of their parents is clearly not consistent with the core American creed that all are created equal, consequently, children have played a key role in our society's efforts to narrow the gap between our political ideals and our economic realities"

--Professor Kenneth Keniston, MIT

"At a time when the family is imperiled by extraordinary social, demographic, and economic change and instability, every part of American society must ask what it can do to strengthen families and support the health development of our children"

--Sen. Rockefeller, Chairman of the National Commission on Children, 1991

I. Introduction

When you walk in to any Head Start center around the country, you are bound to see children playing with puzzles together, or a teacher reading to a child, or volunteers serving breakfast to the class. These are just some of the ways in which the federal Head Start program is working to promote school readiness for children under the age of 5. The grant funding received from the Office of Head Start is used across the United States to offer preschool and early childcare for low-income families. Two years ago, I was one of those volunteers serving breakfast. As I sat with the toddlers, a father walked in to drop off his two-year-old daughter. The father let us know that his daughter had some Sunny D that morning, so she didn't really need breakfast. Sunny D, while looks can convince a passerby of its equivalence to orange juice, has approximately 20 grams of sugar, and the two primary ingredients are water and corn syrup. At that time, I was now faced with a decision. Do I tell the man what I know about the orange beverage? Will I sound elitist, or like a know-it-all, if I say something? Does the man already know about Sunny D, and choose still it as the breakfast of choice? Have I overlooked some particular reason why the father chose Sunny D for breakfast? Within the walls of a Head Start, the center is working to promote positive development of children. However, a child's development depends on many things beyond those walls, and therefore, it is important to examine other policies that have the possibility of promoting positive outcomes for children.

While there are many factors and experiences that explain and create the inequality, I focus on the role of the parent in the development of children. Parents are not the only human interaction that young children receive. With the increase of outside the home childcare or more informal community care, these interactions are presumably critical for

children's development as well. However, the parent-child relationship is unique because of the longitudinal nature of the relationship. While caregivers may only be in the life of a child for a short period of time, parents are more likely to be in contact with a child for the most formative decades of the child's life. In the United States, our laws uphold the ideas that to a certain extent, barring physical abuse or neglect, parents have a reasonable amount of autonomy in deciding how to raise their children. Because our society values personal liberty, the government is not in the business of mandating how parents decide to parent. There are good reasons for society to hesitate to intervene within the home, and this explains why I did not fully know what to do when presented with the experience at Head Start. However, recent research has started to understand the ways in which voluntary home visitation programs could be implemented to better assist low-income parents, while respecting liberty.

By focusing on what can be done to assist parents, policy and programs can intervene earlier than the walls of preschool in order to promote the capabilities of both children and parents. Home visiting programs hold a unique possibility to not only increase the positive development of children, but also promote the capabilities and self-efficacy of parents. While high quality early education programs, including Head Start, have considerable promise, voluntary home visitation programs have equal, or greater promise to achieve positive outcomes for both children and parents. I argue that policy and research must take more seriously the importance of home visitation programs as an integral part of early education policy.

II. The Case for Kids

Students from disadvantaged backgrounds come to their first day of kindergarten behind their high-income counterparts. By age 4, children in the poorest income quintile score at the 32nd percentile in math, 34th in literacy, and 32nd in school readiness (Kalil). Even more concerning, since the 1950s, the income-based gap in test scores has doubled (Kalil). Teachers are forced to try to figure out how to teach students on a wide spectrum of developmental stages in the same classroom. In addition to test scores, disparities in the number of conduct problems and attention deficits are apparent, for whatever reason, between children from different economic backgrounds (Kalil). Even more so than race, family income is the greatest predictor of success in schools (Kalil). It is important to not let these statistics lead to one conclusion as to why certain children achieve academically more than others. It is not completely possibly to understand to a testable degree what exact inputs, material or otherwise, create the inequalities observed. Instead, we as a society must work to understand our role in the inequality and what our obligation may be to work to diminish it. Additional to our moral obligation, it has also been estimated that the societal costs of childhood poverty could be as high as \$500 billion per year through processes such as reduced lifetime earnings (Dearing, et al).

American economist, James Heckman, describes the development of humans as a linear process where the building blocks from prenatal and early childhood are integral in order to master the range of cognitive, social, and emotional competencies needed to succeed in life. A seminal examination of the state of childhood development agreed, stating that "virtually every aspect of early human development, from the brain's evolving circuitry to the child's capacity for empathy, is affected by the environments and experiences that are encountered in a cumulative fashion, beginning in the prenatal period and extending throughout the early childhood years" (Shonkoff and Phillips). The cognitive and noncognitive stimulation of children actually matters more than simply the lack of financial resources when focusing on children's successful outcomes in the future (Heckman). Noncognitive skills include motivation, perseverance, and tenacity (Heckman). These soft skills are important factors in promoting the future capabilities of children, however much of education policy focuses on the outcomes associated with cognitive skills.

Current education policy has been increasingly focused on the possibility of preschool as the great equalizer. President Obama said, "By the end of this decade, let's enroll 6 million children in high-quality preschool. That is an achievable goal that we know will make our workforce stronger" (The White House). Additionally, the Department of Education (ED) has prioritized early learning as one of its key goals (The White House). The conversation around the importance of high-quality preschool is not a new one. For decades, scholars have recognized the possibility that preschool could help to decrease the inequalities seen when children from low-income households and high-income households enter the classroom for kindergarten. A voter poll in August of 2015 found that 87% of Republicans, 89% of independents, and 94% of Democrats believe the years from birth through age four are "extremely" or "very" important to the learning, growth and development of children (Stevens). At the same time, "many are decisively opposed to adding yet another grade to the public school" (Stevens). The debate is not about whether kids, especially low-income kids, matter to the people, but whether certain programs or policies are able to help in the right ways. In 1962, the Perry Preschool Project, one of the most notable of its kind, created a randomized controlled trial that provided high-quality

preschool education to three and four-year-old Low-Income, African American children. While the evidence of this trial, along with others, will be examined in the following section, it is important to note just how long research and education policy has focused on preschool as the answer to inequalities. Just from 2001 to 2004, there was a 20% increase in the number of 4-year-olds nationwide that were enrolled in state funded prekindergarten programs (Early, et al). Both state and federal programs are currently focusing primarily on using high quality preschools to change the developmental trajectory of children, especially children living in low-income households.

III. Early Education Program Effectiveness

Preschool programs, just like any other program, governmental or otherwise, vary on their quality and implementation structure. Because of the variety of programs, it is important to get a broad view of the history of early education in order to understand the possible positive effects that these programs have had on children, as well as the costs associated with them. High-quality programs are able to help children, especially lowincome children, work to catch up before entering kindergarten.

Examining high quality childcare during infancy and early childhood, Dearing, et al. wanted to understand how childcare can help to improve the math and reading scores of low-income children. The general theory holds that high quality care defined by (1) high levels of language stimulation, (2) access to developmentally appropriate learning materials, (3) positive emotional climate with sensitive and responsive caregivers, and (4) opportunities for children to explore their environments (Dearing, et al) can support the healthy development of children. Their findings agree with this hypothesis that children who attend higher quality early childhood care have higher math and reading scores. Dearing et al. explain the consequences that low familial income has on children's achievement by first, decreasing the material resources such as books that can be necessary for development due to the financial constraints, and second, creating harsh and/or inconsistent responses by the parents due to economic stress (Dearing, et al). The study hypothesizes that high quality child-care can mitigate some of these factors that seem to be affecting children's development. However, the examination does not focus on assisting the parent with the problems that they face. Instead, the child-care centers now become middlemen that work to promote the development of the child. This high-quality program was successful in improving the outcomes of children, but the parents were not in the equation.

With quality implementation, preschools have produced positive outcomes for children including increased test scores in the future and better developed soft skills. Through observation and randomized control trials, academics have been studying the effects of high quality preschool programs. Loeb, et al. also examined the effects of center care available in low-income communities because most high-quality preschools are not in low-income areas. This study was meant to understand the possible different effects that center care may have for children from low-income families. The authors note that generalizing the effects of smaller scale demonstration programs is difficult. Using a sample of children between the ages of 12 and 42 months, whose mothers entered to welfare-to-work programs, the study worked to understand the quality of childcare available to women in the welfare system. There was a strong, significant, and positive effect on cognitive outcomes when children participated in center based care compared to participation in homecare by family members or family-friends.

As described earlier, the Perry Preschool Project has been highly regarded in the literature and has been analyzed over the years in order to better understand the longterm effects of preschool. The randomized control trial assigned 123 Black 3- and 4-yearolds from low-income families with parents with low educational attainment to either the control group or in to the preschool (Barnett). The program was designed to last from October to May with 5 days of 2.5 hour long center-based programming, home visitations once a week for 1.5 hours, and group meetings with parents. In undiscounted 2000 dollars, the cost of the program per participant was \$15,827 (Belfield, et al.). With a studentteacher ratio of 5:1, the cost is higher than many preschool programs. The most recent survey of the children of this program was in 1999-2002. Belfield, et al. draws upon information about participants up to age 40 in order to reaffirm the strong positive impacts from participation and the gains for the general public in providing this program. The Perry Preschool Project, one of the oldest and most cited study of its kind, is of particular interest because the program design produced such positive results, but also because of the program design. Although "preschool" is in the name, the program did not look similar to most preschools that are observed around the country. The program used a mixture of center-based instruction and home visitation to achieve the positive results. The design of the program, along with the success, make the Perry Preschool Project a landmark project. However, this project occurred over 60 years ago, and education policy has not deemed it important enough to implement throughout the country. Instead, most preschool programs are not designed as intensively as this model, nor do they include home visitation.

Because the Perry Preschool project scope is somewhat small and not necessarily scalable, a study by Rebecca Marcon tested differently implemented preschool programs in

order to understand the effects these programs may have on different subgroups. Many of the programs previously described were small-scare, high-quality programs. While these programs have proved to produce positive outcomes for the children, it is unclear if they can produce these same outcomes for large-scale implementation. The Marcon study compared the effects of child-initiated classrooms (allows children to actively direct the focus of learning), academically directed classrooms (direct instruction and teacherdirected learning), and a more middle-of-the-road classroom (these classrooms fell in between the other two) on urban, primarily African American, and low-income students. The study was designed to provide large urban school districts with comparative outcome data on three different program types for 4-year-olds. Important findings were that children in classrooms where teachers held to one common belief about learning (either child-initiated or academically directed) did better on standardized measures of development compared to the middle-of-the-road classrooms.

Interestingly, some of the commonly argued "fixes" to early education programming such as improving teacher quality, don't necessarily make a large impact on children's success. One theory of ensuring quality programming has been to require certain qualifications for teachers of preschool. Early, et al. examined the effect of teachers' education on the academic success of children. This is an important aspect of any program policy because teacher salaries are one of the largest costs for education and salaries are usually linked to educational background. Advocates of early childhood education are increasingly likely to want degree requirements of a Bachelor's degree and a state certification to teach 3- and 4- year olds (Early, et al). With the question of the importance of teacher quality in mind, Early, et al. analyzed seven data sets with similarly defined variables in order to see how the educational degree of a lead teacher relate to observed classroom quality and children's value-added academic skills. The results for theses analyses seemed to doubt the presupposed idea that higher educated teacher produce higher quality classrooms or increased academic achievement for children (Early, et al). Out of the 27 analyses, only 8 showed any association between these variables. The authors point out that teacher quality is complex and should not be valued simply by a degree or major. Finally, it should be noted that teachers work as just one part of the larger educational structure and therefore cannot be the sole focus of education policy.

The longstanding research on early education programs has focused primarily on the effectiveness of center-based programs on the academic outcomes of low-income families. However, with a few small-scale studies, home visitation has been added to the mix, and has proved to be a positive addition. Even with these positive outcomes found in high quality programs, the widespread implementation does not exist.

IV. A Theoretical Framework of the Effectiveness of Home Visitation

I have used models to explain the ways in which home visitation is theorized to produce positive outcomes for parents and children. The goals of federally funded home visitation programs are listed below. These goals correspond with one or more of the theoretical models in order to visually explain how home visitation programs could affect households. The first two models are production functions. This means that they work to show development over time. As both children and parents progress in their development, the production function increases. However, due to diminishing marginal returns, the curve eventually flattens out. Home Visitation programs are able to rotate the parental production function up by providing resources and techniques that teach parents about anything from nutrition guidelines, to reading techniques, to way to discipline their child. The last framework is a simple supply and demand curve. However, this curve represents the knowledge that the parent has about community resources. The parent has an assumed supply of community resources (i.e. doctor offices), as well as an assumed demand of community resources (i.e. the benefits that the family could receive from going to the doctor). With visitations, parents may become aware of more resources that are in the community, as well as ways to access the resources, including things like transportation or government benefits that are available. Visitation shifts both the "known" supply of resources and the "known" demand for resources outward. This would most likely increase the family's use of community resources for the family.

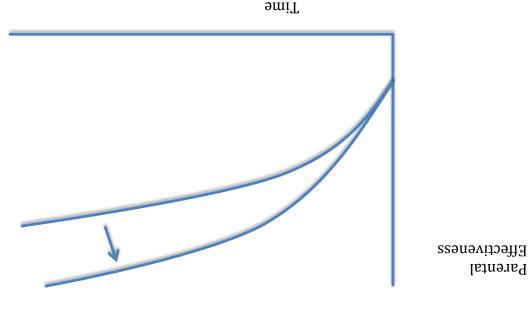
Goals of MIECHV funded programs:

- 1. Teaching parenting skills and modeling effective techniques
- 2. Promoting early learning in the home with an emphasis on positive interactions between parents and children and the creation of a language-rich environment that stimulates early language development
- 3. Providing information and guidance on a wide range of topics including breastfeeding, safe sleep position, injury prevention, and nutrition
- 4. Conducting screenings and providing referrals to address postpartum depression, substance abuse, and family violence
- 5. Screening children for developmental delays and facilitating early diagnosis and intervention for autism and other developmental disabilities
- 6. Connecting families to other services and resources as appropriate

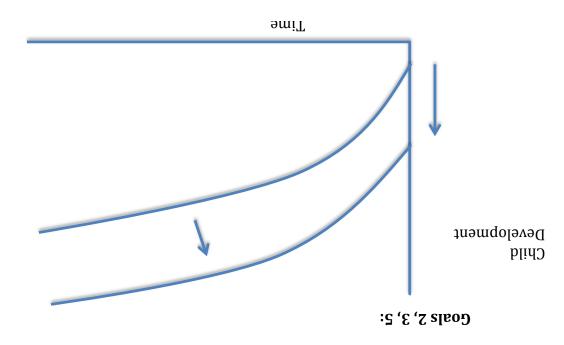
Theoretical Models of Home Visitation Models



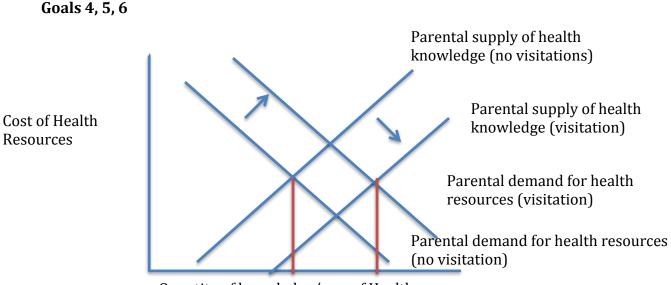
Parental



are given resources and help that rotates the production function upward function, parents begin with a certain level of effectiveness, but with home visitation, they Goals 1, 2, and 3 are interested in increasing parental effectiveness. Created as a production



allow, even before they are born, and allow them to better develop. for the child shifts up with home visitation because of the resources provided to them that Goals 2, 3, and 5 are geared towards the development of the child. The production function



Quantity of knowledge/ use of Health Resources

The supply of health resources available to families increases with the home visitation programs because they are made aware of more programs and ways in which they can get help. Additionally, they may not know that someone in the family is in need of resources.

It is important to note the key goals of home visitation programs are more interested in the broad development of children and of the identity of parents, rather than increasing test scores or academic achievement, as many early educational programs focus. Additionally, some of the most seminal "preschool" programs, such as the Perry Preschool Project, actually seem to have more emphasis on program aspects similar to home visiting programs than an average preschool program in the United States currently employs. It seems as though home visitation has a great chance of adding to current the already existing preschool programs in low-income areas in order to have a greater effect on families.

V. Home Visitation Effectiveness

Similar to preschool, emerging research on Home Visitation programs have produced debate on the effectiveness of programs. There is a large variety in the implementation models and quality of the programs that have been evaluated in the recent years. Home visiting programs are relatively newer when compared to other early education programs, and therefore do not have the depth or breadth of research that others may have. The important aspects of all programs are the delivery of structured services in a home setting, from a trained service provider with the goal of increasing knowledge and awareness of children and caregivers (Zercher and Spiker). Congress established the Federal Home Visiting Program in 2010 and in April 2015, the Medicare Access and CHIP Reauthorization Act of 2015 was passed that included a two year extension of the Home Visiting Through 2017 (USDHHS). This program is the first nationwide expansion of a home visiting program and has provided more than 1.4 million home visits since 2012. Even with this

	2007	2013	Percent change
Low income	28,236,002	31,820,739	13%
Poor	12,867,473	15,770,127	23%

Figure 1

only 115,500 parents and children were served

congressional support,

during FY2014 (USDHHS). However, Figure 1 represents the increase in number of children living in either low-income or poor households. The federal poverty threshold (FPT) in 2013 was \$23,624 for a family of four with two children, and low-income is defined as a family income less than 200% of the FPT and poor is defined as less than 200% of the FPT. While the number of children living in poor households is increasing in the United States, home visitation programs are only serving a relatively small number of these households. Because of the newness of the programs, this is not surprising. However, the mechanisms that could be causing this disparity should be examined.

President Obama has stated in his Plan for Early Education for all Americans his commitment to evidence-based home visiting programs because of the ability of the programs to "work with at-risk families in their homes and connect them to assistance that impacts a child's health, development, and ability to learn" (The White House). There is a commitment to the possibility of home visiting programs and their ability to help children's development, but it seems as though the policies have not yet fulfilled their potential. The push for commitment to home visiting programs extends beyond the promise of simply improving academic performance. As will be explained in greater detail, the various effects of home visitation programs create a broad range of outcomes that can be achieved through these programs. These outcomes work to create a more robust development for both children and parents. The commitment to research will allow policy to better argue for, and implement, high-quality home visiting programs.

With shorter evaluation periods, the long-term effects of home visiting programs are less clear, but promising. It is difficult, and not necessarily useful, to compare follow up studies of the Perry Preschool Project, to the shorter follow-up studies of home visiting programs. Programs such as Home Instruction for Parents of Preschool Youngsters (HIPPY) have only followed up with children at age 6, while Perry Preschool has followedup throughout the children's adult life. However, a benefit-cost ratio has been estimated for HIPPY at \$1.80. This means that society benefits almost twice as much from the investment (Karoly, et al.). The benefit-cost ratio of the Nurse-Family Partnership (NFP) program has been estimated at a much higher rate of \$5.70 per dollar spent for higher-risk families and \$1.26 for lower-risk families (Karoly, et al). This program only followed up with children when they reached age 15. It is very important for the research to continue in order to fully understand the impact that home visitation programs could likely have on children and society as a whole.

An experimental study of 6 Healthy Families Alaska (HFAK) programs randomly assigned 325 families to HFAK or control groups. Looking at child outcomes like health care use, development and behavior and parent outcomes of knowledge of infant development, parenting attitudes, quality of the home environment, and parent-child interaction (Caldera, et al). These outcomes seem to more broadly capture the goals of home visiting programs. The impact on children was primarily positive for their developmental and behavioral outcomes. Mothers participating in HFAK had significantly higher ratings on the Maternal Self-efficacy Scale (Caldera, et al).

Home-based programs have the ability to improve the development of skills been found to be able to teach parents how to provide a positive food environment for their children (Haire, et al). The H5-KIDS program has been implemented all over the country, and has found that home based intervention focused on teaching parents to ensure a positive eating environment with their children is able to increase the fruit and vegetable intake of the children (Haire, et al). Small-scale studies of home visitation programs are most common, therefore it is difficult to understand how a larger scale program implementation would differ, however the research seems promising that a variety of outcomes can be obtained through programs such as these.

Another theorized effect of home visiting programs is the possible reduced incidence of child abuse and neglect. In upstate New York, 400 pregnant women were recruited to

participate in a study that provided home visitation during pregnancy and infancy (Eckenrode, et al). Mothers that received home visitation had statistically significantly fewer cases of child maltreatment reports where the mother was the perpetrator (Eckenrode, et al). Additionally, prenatal and infancy home visitation was found to reduce the proportion of girls entering the criminal justice system during their teens, and the same girls were had fewer children and less Medicaid use than children who did not receive home visitation (Eckenrode, et al).

Certain programs focus more on teaching parents learning techniques that can improve the development of children. One intervention used the dialogic reading method, a method that encourages parents to engage children while reading to them, to promote language skills among 2- and 3-year-old children. Instruction on the dialogic method resulted in more than a 4-fold increase in the parents' use of dialogic reading behaviors (Huebner, et al). Instruction on the method was done either in-person or by video. The in-person instruction was more effective, especially for parents with lower education levels (Huebner, et al). This study seems to suggest that the in-person aspect of home visiting programs is a very important part of the success. It also sheds light in to the possibilities of home visitation in increasing the language skills of children at a young age.

In the same way as any preschool program, the implementation of a program can determine the effects. Not all home visiting assessments have found robust positive effects for home visits on families. Olds, et al. examined the effectiveness of home visiting by paraprofessionals and by nurses in improving maternal and child health. Completing about 6 home visits during pregnancy and 20 visits between birth and the children's second birthdays, the study found that the lesser-trained paraprofessionals did not have as significant of effects on the designated outcomes as did the nurses. Nurse-visited smoking mothers-to-be had greater reductions in there cotinine levels at the end of pregnancy, and were less likely to have a subsequent pregnancy within the first year of having their first child. The nurse-visited mothers also were examined to interact more with their child than the control pairs. While paraprofessional-visited mothers and children did have more positive outcomes when compared to the control pairs, the results were not robust as the nurse-visited results were.

Reviews of large-scale home visiting programs have found that enrollment can be one of the primary difficulties for programs (Zercher, et al). Keeping programs voluntary is important for recognizing and respecting the liberty of parents and families, however, it will be important for any program to understand how to best implement home visiting programs in a way that make them seem useful and not stigmatizing. It is easy to understand that a family may not want to invite a stranger in to their home. However, the implementation and advertising of future home visitation programs need to be sure to understand the ways to talk about these programs in a way that is not condescending not accusatory. At the same time, parenting, just like any job, requires some sort of learning and training. No matter the income level or education of the parent, raising a child is a new skill that must be cultivated.

Implementation and quality are the defining factors of any program's effectiveness. However, the possibilities of producing desirable outcomes for children and their parents are greatly increased by a true commitment to voluntary home visitation. Stories like this one is a story of a father wanting better for his child, but needing help: Layla was born 2 years ago, 6 weeks early. She was addicted to methadone and had marijuana in her system. She was moody, had the jerks and would lose her breath. It was very scary. My childhood wasn't that great but I knew I wanted better for Layla.

But taking care of a baby alone is hard. I didn't know how to do all those things a baby needs. When I got the call from Catawba Valley Healthy Families asking me if I wanted to join their program, I couldn't believe it. Here was someone wanting to teach me how to take care of my daughter. And if I was going to have a chance to give Layla a better life, I needed help.

Morgan with Barium Springs has been coming to see us for a while now. She answers my questions about baby stuff. She brings books for me to read to Layla. She helps me remember all the doctor's appointments. We work together to make sure Layla is doing things a baby should do at her age.

Today, I have a 2-year-old daughter who is healthy and happy. We go to church, go to the park and read stories at night. She's 2 and doesn't listen sometimes, but Morgan has showed me how not to get angry. She's coached me on disciplining Layla the right way. I don't want Layla to be afraid or get hurt when she gets in trouble like I did.

--Jonathan, Burke County, North Carolina

The name has been changed to protect his privacy, but this father's story is one of many from parents in MIECHV programs around the country

VI. The History of MIECHV

The Affordable Care Act created the first nationwide Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV). Congress created this program to support voluntary, evidence-based home visiting services for at-risk pregnant women and young children up to kindergarten entry. Administered through the Health Resources and Services Administration (HRSA), in partnership with the Administration for Children and Families (ACF), the program will currently fund 17 different evidence-based implementations of home visiting in order to provide services to thousands of households around the country (USDHHS). States, territories, and tribal entities receive funding through the program by applying for grants to implement the evidence-based model that meets the specific needs of their communities, but the grantees are also allowed to spend 25% of funding on implementing "promising approaches that will undergo rigorous evaluation" (USDHHS). All funded programs, have three fundamental elements. 1) Screening to help prevent and identify physical, mental, or developmental problems, 2) Case Management that includes developing a care plan, providing referrals, and scheduling treatments, and 3) Family support, counseling, and parent skills training to aid the parent with knowledge and skills to address the needs of the child (USDHHS). The programs rely on nurses, social workers, early childhood educators or other trained personnel to assist during "early parenting improve the lives of children and families by preventing child abuse and neglect, supporting positive parenting, improving maternal and child health, and promoting child development and school readiness" (USDHHS).

VII. The Case for Home Visitation

Through years of research, randomized controlled trials, and follow-up studies, it is still not clear if there is one program or approach that will help all children in low-income families develop and succeed. However, this is not a goal that we, as a society, should naively think could ever be reached. We are put in a position where we can only act upon the information that we have and the theories that we set forth. Because the answer may never be reached does not mean that the question is not necessary to ask.

As a country that strives to uphold the ideal of freedom and liberty through our laws and ideals, it is important for citizens to have a critical eye on the policies that the government is putting in place as well as on the societal structure that is being upheld. If we are going to promote these lofty ideals, we need to be committed to actually upholding the policies that perpetuate liberty and equality of opportunity. As described previously, there are disparities in the development of children based on the income of their families. This development is not solely limited to academic achievement. While much research uses value-added on test scores as a factor to prove program success, we must ask the question; is this what matters?

It is reasonable that when one is asked why they think test-scores are used to determine success; they may give one of, or both, of these answers. (a) Because its easy to measure a student's test score, or (b) Because doing well in school means you are probably more likely to get to go to college, have a better job, etc. While both answers may have some truth within them, they don't necessarily answer what intrinsic value a score on a test has to the positive development of a child. Instead they explain the rational reasons that make test scores practical. Janet Currie, a prominent economist, explains the "many would argue that the ultimate goal of early intervention is to produce "better" adults. Where "better" is measured in terms of things like schooling attainment, earning, welfare use, and crime rate" (Currie). However, to be truly committed to the wellbeing of others, it may be important to understand these testable indicators may not be the only things that matter.

Using Amartya Sen's Capabilities Approach, it is somewhat easier to understand what matters to many individuals who care about the wellbeing of others. The capability of an individual is the combination of different things that the person can do or be. Using this approach, what matters in not what the person decides to actually do or be, but what the "doings and beings" that they have the ability to choose from. This approach decreases the ability of individuals to both blame others for the choices that they made, or for others to reject their responsibility to help because of the possibility that people may choose the "wrong" life path. Using this framework, it may not be possible to empirically examine how a preschool program or a home visitation program necessarily promotes capabilities, but we are able to understand that the developmental differences in children show that capabilities are not equally promoted for all.

If we are committed to true equal opportunity, we must be committed to eradicating these differences in child development that are of no fault of the child or the family. Highquality preschool programs do seem to be able to create positive outcomes, but they are not widely enough implemented. At the same time, a policy like universal pre-kindergarten must heed caution because we cannot believe we have fulfilled our moral obligation to children because preschool is available for all. I would be remise if I did not recognize the history of structural violence that has prevented low-income families, and particularly minorities, from receiving certain resources, especially governmental resources, because of their status in life. For example, the school a child attends primarily determined by the neighborhood where he or she lives. Affordability, as well as a history of discrimination in the housing market, has created school districts and neighborhoods that are rather segregated based on income and race. While districts with larger shares of disadvantaged children have been estimated to spend a similar amount per pupil, this does ensure that the schools are the same quality (Rouse). Instead, older school districts with aging buildings may need to spend more on maintenance of facilities, or districts with larger percentages of special education (presumably also lower-income districts) will need to spend have smaller classes and hire more teacher (Rouse). Also, urban districts face different higher-wage labor markets. These structures of society must be recognized to understand the moral

obligation to provide services in the early years that can give children a fair shot at developing capabilities.

As illustrated, the structures of society are currently working against children who are born in to low-income families. To illustrate the obligation that society has to work to mitigate these inequalities, John Rawls' Theory of Justice recognizes the "primacy of justice" (Rawls). His theory goes beyond a social contract of other previous philosophers by realizing biases between individuals. Because individuals are biased, Rawls illustrates the "principles that free and rational persons concerned to further their own interests would accept in an initial position of equality" (Rawls), as the principles in which hypothetical contractors, not knowing ones place in society, would agree. It is presumable that each person would want the society to be set up in such a way that they themselves, even if born in to the lowest social standing, would still have a chance to succeed in life. These agreed upon principles, are thus considered fair. Rawls calls this idea "justice as fairness" (Rawls). From this set of principles, it should be true that members of society could say that the society is working in the same way that it would if they were all "free and equal persons whose relations with respect to one another were fair" (Rawls). These principles do not automatically mean that there are no inequalities in the world. However, Rawls explains that inequalities "are to be arranged so that they are (a) reasonably expected to be to everyone's advantage, and (b) attached to positions and offices open to all". When looking at the development of children, the current structure in the United States in unjust because the inequalities do not follow either of these tenants. There are barriers in place, both financially and socially, the blockade certain families from pursuing their conception of the

good. Therefore, society is obligated to work to understand ways in which we can promote liberty and fair equality of opportunity for all.

Home visitation programs have the ability to assist in a more individualized way that gives parents the dignity and resources to promote the development of their children. Rather than having a community program act as a replacement, adding home visitation either to an early education program or preschool program can intervene in a way that promote capabilities of both parents and children. Additionally, it is integral that home visitation programs are voluntary. The voluntary nature of the program ensures that policy is upholding liberty above all else. However, providing a federal program is necessary to ensure fair equality of opportunity for children. By allowing families the opportunity to choose to enroll in a home visiting program, policy is working to better assist in the promotion of capabilities.

VIII. Conclusion

A real discussion and commitment to researching and understanding the effects of voluntary home visitation is necessary to understand how these programs could actually complement early education, more community-based programs. However, it seems likely that the goals that are most important for the promotion of equal opportunity in America, are the goals that home visitations are able to achieve. While these programs do not replace the need for preschool programs, it does allow for parents to learn and develop alongside their children and is promising as a policy that could decrease developmental disparities among children. Alongside community-centered early education, voluntary home visitation programs are able to promote liberty and fair equality of opportunity for low-income families in America.

Works Cited

Barnett, W. Steven. "Benefit-cost analysis of the Perry Preschool Program and its policy implications." *Educational evaluation and policy analysis* 7.4 (1985): 333-342.

Belfield, Clive R., et al. "The High/Scope Perry Preschool Program cost–benefit analysis using data from the age-40 followup." *Journal of Human resources* 41.1 (2006): 162-190.

Brooks-Gunn, Jeanne, and Lisa B. Markman. "The Contribution of Parenting to Ethnic and Racial Gaps in School Readiness". *The Future of Children* 15.1 (2005): 139–168.

Caldera, Debra, et al. "Impact of a statewide home visiting program on parenting and on child health and development." *Child abuse & neglect* 31.8 (2007): 829-852.

Currie, Janet. "Early childhood education programs." *The Journal of Economic Perspectives* 15.2 (2001): 213-238.

Dearing, Eric, Kathleen McCartney, and Beck A. Taylor. "Does higher quality early child care promote low-income children's math and reading achievement in middle childhood?." *Child development* 80.5 (2009): 1329-1349.

Early, Diane M., et al. "Teachers' education, classroom quality, and young children's academic skills: Results from seven studies of preschool programs." *Child development* 78.2 (2007): 558-580.

"Early Learning." The White House. The White House, n.d. Web. 02 Apr. 2016.

Eckenrode, John, et al. "Preventing child abuse and neglect with a program of nurse home visitation: The limiting effects of domestic violence." *Jama*284.11 (2000): 1385-1391.

Eckenrode, John, et al. "Long-term effects of prenatal and infancy nurse home visitation on the life course of youths: 19-year follow-up of a randomized trial." *Archives of Pediatrics & Adolescent Medicine* 164.1 (2010): 9-15.

Haire-Joshu, Debra, et al. "High 5 for Kids: the impact of a home visiting program on fruit and vegetable intake of parents and their preschool children." *Preventive medicine* 47.1 (2008): 77-82.

Heckman, James J. "Skill formation and the economics of investing in disadvantaged children." *Science* 312.5782 (2006): 1900-1902.

Huebner, Colleen E., and Andrew N. Meltzoff. "Intervention to change parent–child reading style: A comparison of instructional methods." *Journal of Applied Developmental Psychology* 26.3 (2005): 296-313.

Kalil, Ariel. "Inequality begins at home: The role of parenting in the diverging destinies of rich and poor children." *Families in an Era of Increasing Inequality*. Springer International Publishing, 2015. 63-82.

Karoly, Lynn A., and Hugh P. Levaux. *Investing in our children: What we know and don't know about the costs and benefits of early childhood interventions*. Rand Corporation, 1998.

Loeb, Susanna, et al. "Child care in poor communities: Early learning effects of type, quality, and stability." *Child development* 75.1 (2004): 47-65.

Marcon, Rebecca A. "Differential impact of preschool models on development and early learning of inner-city children: A three-cohort study." *Developmental psychology* 35.2 (1999): 358.

"Maternal, Infant, and Early Childhood Home Visiting." *Maternal, Infant, and Early Childhood Home Visiting*. Health Resources and Services Administration, n.d. Web. 02 Apr. 2016.

Olds, David L., et al. "Home visiting by paraprofessionals and by nurses: a randomized, controlled trial." *Pediatrics* 110.3 (2002): 486-496.

Phillips, Deborah A., and Jack P. Shonkoff, eds. *From Neurons to Neighborhoods:: The Science of Early Childhood Development*. National Academies Press, 2000.

Rawls, J. (1999). A theory of justice. Cambridge, MA: Harvard University Press.

Rouse, Cecilia Elena, and Lisa Barrow. "U.S. Elementary and Secondary Schools: Equalizing Opportunity or Replicating the Status Quo?". *The Future of Children* 16.2 (2006): 99–123.

US Department of Health and Human Services. "The maternal, infant, and early childhood home visiting program partnering with parents to help children succeed." *Retrieved from HRSA Maternal and Child Health web site: http://mchb. hrsa. gov/programs/homevisiting/states/index. html* (2015).

Zercher, Craig, and Donna Spiker. "Home visiting programs and their impact on young children." *Tremblay RE, Barr RG, Peters RDeV, eds. Encyclopedia on Early Childhood Development* (2004): 1-8.