



To: Senate Education and Higher Education Committees
From: Jordan Wildermuth, Nurse-Family Partnership
Re: Subject Matter On Early Childhood Education Funding and Access to Early Literacy
When: September 16, 2020, 12:00pm

Chairpersons Bertino-Tarrant and McGuire,

On behalf of Nurse-Family Partnership, thank you for your continued investment in the early childhood education system and the opportunity to provide comments on why funding for programs such as evidence-based home visiting is especially important given the lingering effects of COVID-19. Evidence-based home visiting is an integral part of the early childhood education system. Mothers who struggle with depression, limited cognitive functioning, lack of self-esteem, or social disadvantage face greater challenges caring for their children. Subsequently children of mothers with these challenges may also struggle to grow and thrive socially, emotionally, and academically. All these issues have been exacerbated by COVID-19.

To that end, children who are exposed to substances during pregnancy, maltreated, or cared for poorly early in life have difficulty with learning, memory, and early language development. It is no surprise to learn these children quickly fall behind in school functioning. But healthy pregnancies and parenting care beginning at the earliest age can make a difference.

Research on the Nurse-Family Partnership shows that their nurse-visited children fare better in cognitive and language development than their control-group counterparts. Nurse-Family Partnership can help ensure school readiness for young children born into families at risk and prevent challenges in early education that can lead to a lifelong struggle with academic achievement.

When mothers have more difficulty caring well for their children because they suffer from symptoms of depression, limited intellectual functioning and diminished belief in their ability to manage their lives, and they are surrounded by social disadvantage, research on the Nurse-Family Partnership shows that their nurse-visited children fare better in cognitive and language development than their control-group counterparts.

Children's early language and cognitive development are associated with school performance and later earnings. In the Memphis trial of Nurse-Family Partnership, nurse-visited children born to mothers with low psychological resources (higher levels of depression, anxiety, and lower levels of intellectual functioning and sense of mastery over their lives) had better academic achievement in the first six years of elementary school compared to their counterparts in the control group. In the Denver trial, nurse-visited four-year olds born to mothers with low psychological resources had better language development and ability to control their impulses than did their control-group counterparts.

While the state of the budget depends greatly on future federal relief packages and the state's economic recovery, we wanted to highlight how funding such as the early childhood block grant at the Illinois State Board of Education plays a large role in the ability to reach the families most in need of these supports. We would urge the Committee to explore ways to expand access to home visiting for all eligible families to take innovative models such as Nurse-Family Partnership to scale. A part of that strategy includes securing sustainability through diversification of funding, including establishing Medicaid financing for evidence-based home visiting.

We appreciate the opportunity to provide these comments and look forward to working with you to ensure school readiness for all Illinois children.