

HB 614, HD 2

RELATING TO CHILDREN.

Report Title: Healthy Start; Home Visitation; Department of Health; Appropriation

Description: Establishes a hospital-based screening and assessment and intensive home visitation program within the Department of Health. Increases the Hawaii Tobacco Settlement Special Fund (Special Fund) ceiling. Appropriates funds from the Special Fund for hospital-based screening and assessment and intensive home visiting services. Appropriates funds from the Temporary Assistance for Needy Families Fund for intensive home visiting services. Effective July 1, 2030. (HB614 HD2) (\$)

Companion: SB925

Package: None

Current Referral: HTH/HMS/WAM

Introducer(s): YAMANE, AWANA, MIZUNO, Fontaine



STATE OF HAWAII
DEPARTMENT OF HEALTH
P.O. Box 3378
HONOLULU, HAWAII 96801-3378

In reply, please refer to:
File:

SENATE COMMITTEES ON HEALTH,
HUMAN SERVICES, AND WAYS AND MEANS

H.B. 614 HD2, RELATING TO CHILDREN

Testimony of **Loretta J. Fuddy, A.C.S.W., M.P.H.**
Director of Health

April 6, 2011

Department's Position: The Department of Health supports the intent but defers on the fiscal implications until the Executive Budget has been finalized.

Fiscal Implications: Appropriates funds from the Tobacco Settlement Special Fund and the Temporary Assistance to Needy Families fund.

Purpose and Justification: The purpose of this measure establishes a hospital-based screening and assessment program and home visiting program for families at high risk for child maltreatment. The Department appreciates the intent of this measure and requests that revisions be considered to allow for more flexibility in operations in order to be responsive to anticipated future federal funding for home visitation services. The Department also recommends that due to references to HRS321 and HRS328 L2 ; language establishing this program and language specifying funding sources, remain fluid and expansive in order to safeguard against future possible programming restrictions. Recommended revisions to the measure are attached to this testimony.

Funding provided by this measure would allow the program to fulfill federal funding requirements for matching funds and provide the resources necessary to continue its current initiatives regarding program enhancements to improve service outcomes. The program

currently operates two sites which participate in the federally funded Evidence Based Home Visitation grant. Valuable and exciting findings from this project are anticipated, with positive outcomes expected to demonstrate best practices for home visitation. The Department would use funding to scale up its two program sites and to disseminate these best practices into the existing home visiting provider community. Funds would also continue and build upon the statewide development of the hospital based screenings and assessments.

Thank you for this opportunity to testify.

H.B. NO.614 H.D.2

A BILL FOR AN ACT

RELATING TO CHILDREN.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. Hawaii has long been a leader in early
2 childhood services, reflecting an understanding of the
3 importance of early childhood development. This has resulted in
4 proactive legislation to ensure the safety and well-being of
5 infants, toddlers, and pre-schoolers. Unfortunately, many of
6 these services have been eliminated or drastically cut over the
7 past two years. Hawaii's healthy start program is one of the
8 services that has been affected.

9 The healthy start program was designed to prevent child
10 abuse and neglect and promote child development among high-risk
11 infants and toddlers. Although healthy start was deployed
12 statewide in 2001, cuts to the program have resulted in
13 elimination of assessment capacity and home visiting services
14 for most of the State. Restoration of these critical services
15 is the first step towards establishment of an effective,
16 coordinated continuum of early childhood services.

1 Research has shown that a combination of factors, such as
2 abuse of the parent in childhood, social isolation, lack of
3 social supports and life skills, substance abuse, domestic
4 violence, and mental health problems place parents at risk for
5 abuse and neglect of their children. Poverty and unemployment
6 can also be major contributing factors. The healthy start
7 approach uses research-based interview procedures to reach out
8 to parents who may be at risk. Intensive home visits, which
9 seek to strengthen protective factors and reduce risk, promote
10 child and family development, and avert abuse and neglect, are
11 also provided. Restoration of universal screening and home
12 visitation services is a vital step in offering culturally
13 responsive, evidence-based services to address different levels
14 of family needs and risks and ensuring the State meets its public
15 health responsibility of surveillance for needs assessment.

16 A recent renaissance in research and national-level policy
17 on early childhood underscores the foresight of the legislature
18 in focusing on early childhood issues. For example, the
19 National Scientific Council on the Developing Child published
20 *The Science of Early Childhood Development: Closing the Gap*
21 *Between What We Know and What We Do* (Harvard University, 2007).
22 Composed of leading neuroscientists, pediatricians,
23 developmental psychologists, and economists, the National
24 Scientific Council on the Developing Child reviewed all current
25 research and literature on early childhood development. Based

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on this research, the publication presents the following core concepts of development and considers their implications for policy and practice:

- (1) Brain architecture is built from the bottom up, with simple circuits and skills providing the scaffolding for more advanced circuits and skill over time;
- (2) Toxic stress in early childhood is associated with persistent effects on the nervous system and stress hormonal systems that can damage developing brain architecture and lead to lifelong problems in learning, behavior, and mental and physical health;
- (3) Policy initiatives that promote safe, supportive relationships and rich learning opportunities for children create a strong foundation for later learning, followed by greater productivity in the workplace, and solid citizenship in the community;
- (4) Substantial progress in proper child development can be achieved through growth-promoting experiences, provided by a range of sources, including parent education, family support, early intervention services, and early childhood education;

1 (5) Later remediation for highly vulnerable children will
2 produce less favorable outcomes and cost more than
3 appropriate early intervention, beginning in the
4 earliest year of life;

5 (6) Responsible investment is needed to produce results;
6 it is not profitable to utilize interventions that may be
7 less costly but fail to produce needed results; and

8 (7) Child development is the foundation for community and
9 economic development; capable children become the
10 foundation for a prosperous, sustainable society.

11 Given the foregoing realities findings, the legislature finds it
12 prudent to reinstate hospital-based assessments
13 and intensive home visiting for families at highest risk, along with
14 referrals of other families to existing home visiting
15 services. The legislature further finds that utilizing moneys from
16 the Hawaii tobacco settlement special fund and temporary assistance
17 for needy families funds is appropriate and necessary to ensure that
18 the public health interests of the health and safety of at risk
19 children of the State are met.

20 The purpose of this Act is to reinstate hospital-based
21 ~~screening and~~ assessments and to target improved intensive home
22 visiting services to the highest risk families of newborns in
23 communities across the State of Hawaii, ~~while offering other families~~
24 ~~a range of evidence-based home visiting services based on their~~
25 ~~identified needs.~~ An additional purpose of this Act is to

1 appropriate moneys from the Hawaii tobacco settlement special fund
2 and temporary assistance for needy families for the purposes of this
3 Act.

4 SECTION 2. Chapter 321, Hawaii Revised Statutes, is
5 amended by adding a new section to be appropriately designated
6 and to read as follows:

7 "§321- Assessment and home visitation program;
8 established. (a) Within the limits of available funds, there is
9 established within the department of health a hospital-based
10 screening and assessment and intensive
11 home visitation program. This program shall may follow the
12 guidelines of the multidisciplinary teams, as determined by the
13 department. department's improved healthy start program.

14 (b) The hospital-based screening and assessment component of
15 the hospital-based screening and assessment and intensive
16 home visiting program shall: pursuant to this section may include:

- 17 (1) Include proactive universal screening and assessment
18 to enroll families prenatally or at birth before any
19 child welfare reports are made;
- 20 (2) Make intensive home visits available on a voluntary
21 basis for families assessed to be at the highest risk,
22 with the highest priority given to those with scores
23 of forty and above on the family stress checklist or
24 parent survey; and

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3 ~~(3) Make referrals for families with lower or no-risk~~
4 ~~scores, based on the needs of the family, to a range~~
5 ~~of evidence-based home visiting services.~~

6 (c) ~~The intensive home visiting component of the hospital-~~
7 ~~based screening services and assessment and intensive home~~
8 ~~visiting program shall:~~

9 ~~(1) Maintain critical elements developed by~~
10 ~~multidisciplinary teams as determined by the~~
11 ~~department, especially related to caseloads, staff~~
12 ~~ratios, and training;~~

13 ~~(2) Use a relationship-based approach with families, mother-~~
14 ~~infant dyads, and supervisor and family support worker~~
15 ~~relationships;~~

16 ~~(3) Focus strongly on caregiver and infant attachment and~~
17 ~~social and emotional development, following principles~~
18 ~~of infant mental health;~~

19 ~~(4) Use the clinical specialist approaches of enhanced~~
20 ~~healthy start in working with very high-risk families;~~

21 ~~(5) Conduct interventions to strengthen protective factors~~
22 ~~and reduce risk;~~

23 ~~(6) Integrate emerging evidence-based practice as feasible and~~
24 ~~appropriate~~
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1 ~~(7) Ensure continuous quality improvement by engaging~~
2 ~~program staff; and~~

3 ~~(8) Evaluate outcomes related to risk reduction, child~~
4 ~~development, family resilience, and confirmed cases of~~
5 ~~abuse and neglect; and~~

6 ~~(9) Continue to evaluate the impact of intensive home~~
7 ~~visitation services and make program improvements as~~
8 ~~needed.~~

9 ~~Services shall continue until the child reaches three years of~~
10 ~~age, or until the child reaches five years of age if the child~~
11 ~~has a younger sibling." Services may be initiated on an incremental~~
12 ~~basis, with geographic priority to be determined by the departments~~
13 ~~needs assessment, to be implemented as funding becomes available.~~

14 SECTION 3. ~~The Hawaii tobacco settlement special fund ceiling~~
15 ~~appropriation shall be increased to \$ for fiscal year 2011-2012~~
16 ~~and \$ for fiscal year 2012-2013.~~

17 ~~SECTION 4.~~ There is appropriated out of the Hawaii tobacco
18 settlement special fund, ~~established pursuant to section 328L-2,~~
19 ~~Hawaii Revised Statutes,~~ the sum of \$ or so much
20 thereof as may be necessary for fiscal year 2011-2012 and the
21 same sum or so much thereof as may be necessary for fiscal year
22 2012-2013 for hospital-based screening and assessment and
23 intensive home visiting services.

24 The sums appropriated shall be expended by the department
25 of health for the purposes of this Act.

1 SECTION 54. Of the federal appropriation for the department of
2 human services, there is appropriated out of the temporary
3 assistance for needy families funds in the sum of \$ or so
4 much thereof as may be necessary for fiscal year 2011-2012 and
5 the same sum or so much thereof as may be necessary for fiscal
6 year 2012-2013 for intensive home visiting services.

7 The sums appropriated shall be transferred by the
8 department of human services by interdepartmental transfer (U
9 fund) to the department of health, to be expended by the
10 department of health for the purposes of this Act.

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12 SECTION 65. New Statutory material is underscored.

13 Section 76. This Act shall take effect on July 1, 2030

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1 Requested amendments to HB614 HD2

2 Page 2:

3 Line 12: insert "and ensuring the State meets its public health responsibility of surveillance for needs
4 assessment".

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6 Page 4:

7 Line 11: delete "realities" insert "findings"

8 Line 15: insert "The legislature further finds that utilizing moneys from the Hawaii tobacco settlement
9 special fund and temporary assistance for needy families is appropriate and necessary to ensure that the
10 public health interest of the health and safety of at risk children of the State are met"

11 Line 17: delete "screening and"

12 Line 19: insert after State "of Hawaii"

13 Line 19: delete "while offering other families a range of evidence based home visiting services based on
14 their identified needs." Insert " An additional purpose of this Act is to appropriate moneys from the
15 Hawaii tobacco settlement special fund and temporary assistance for needy families funds for the
16 purposes of this Act"

17

18 Page 5:

19 Line 5: insert in (a) "Within the limits of available funds," there is established....

20 Line 7: delete "shall", insert "may"

21 Line 8: delete "multidisciplinary teams, as determined by the department" , insert "department's
22 improved healthy start program."

23 Line 10: delete "component of the hospital based screening and assessment and intensive home visiting
24 program shall" Insert "pursuant to this section may include:"

25 Line 13: delete "Include"

26 Line 14-15: delete all

27 Line 16: delete "Make intensive"

28 Line 17-20: delete "for families assessed to be at the highest risk, with the highest priority given to
29 those with scores of forty and above on the family stress checklist or parent survey"

30

31 Page 6:

32 Line 1: delete "Make" "with lower or not risk scores"

33 Line 2: delete "a range of evidence based"

34 Lines 4-22: delete all

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37 Page 7:

38 Lines 1-11: delete all

39 Line 11: insert "Services may be initiated on an incremental basis, with geographic priority to be
40 determined by the department's needs assessment and to be implemented as funding becomes available.

41 Lines 12-14: delete all

42 Line 15: delete "Section 4"

43 Line 16: delete "established pursuant to section 328L 2, Hawaii Revised Statutes"

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- 1 Page 8:
- 2 Line 3: change section "5" to "4" and insert "Of the federal appropriation for the department of human
- 3 services" change "T" to "t"
- 4 Line 12: change section "6" to "5"
- 5 Line 13: change section "7" to "6"
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NEIL ABERCROMBIE
GOVERNOR



PATRICIA McMANAMAN.
DIRECTOR

PANKAJ BHANOT
DEPUTY DIRECTOR

STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
P. O. Box 339
Honolulu, Hawaii 96809-0339

April 6, 2011

MEMORANDUM

TO: Honorable Josh Green, M.D., Chair
Committee on Health

TO: Honorable Suzanne Chun Oakland, Chair
Committee on Human Services

TO: Honorable David Y. Ige, Chair
Committee on Ways and Means

FROM: Patricia McManaman, Director

SUBJECT: **H.B. 614, H.D. 2 - RELATING TO CHILDREN**

Hearing: Wednesday, April 6, 2011; 2:45 p.m.
Conference Room 229, State Capitol

PURPOSE: The purpose of H.B. 614, H.D. 2, is to establish a hospital-based screening and assessment and intensive home visitation program under the Department of Health; appropriates funds from the tobacco settlement special fund and the temporary assistance to needy families fund.

DEPARTMENT'S POSITION: The Department of Human Services (DHS) supports the intent of this bill.

At this time the Department does not have any additional TANF block grant funding available to support this program. The annual Temporary Assistance for Needy Families (TANF) federal block grant amount is fully allocated and accounted for in the proposed Executive Biennium 2011-2013 budget.

Additionally, the Department advises that federal law prohibits the Department from transferring TANF funds to any entity other than the Social Services Block Grant (SSBG) Program and the Child Care Development Fund (CCDF) Program. TANF funds must be appropriated to the TANF State Agency, which is DHS. DHS may then authorize the expenditure of the appropriated TANF funds for the identified purpose.

We defer to the Department of Health on the use of the Tobacco Settlement Special Fund.

Thank you for the opportunity to provide **comments** on this bill.

The American Heart Association mission is:
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Testimony on HB 614, HD2, Relating To Children

One of the American Heart Association's leading policy focuses is to insure that each state invests in tobacco prevention, control and cessation programs at at least the minimum level recommended by the Centers for Disease Control. Tobacco use remains the leading preventable cause of death in our state and in the country, and a leading risk factor for heart disease and stroke.

The U.S. Centers For Disease Control (CDC) recommends that Hawaii needs to invest a *minimum* of \$15.2 million each year to fund a fully effective, comprehensive tobacco control program. The most that Hawaii has invested since the Tobacco Prevention and Control Trust Fund was established was approximately \$8 million.

At the same time, according to the Federal Trade Commission, the tobacco companies spend approximately \$42 million each year toward marketing and advertising their deadly products in Hawaii.

The resulting loss of revenue dedicated to tobacco prevention, control and cessation programs proposed by this bill would mean that fewer new community programs could be established and it would stall the growth of a sustainable infrastructure of programs that would otherwise further reduce smoking rates, and deaths and disability caused by tobacco use.

A study completed last year by Penn State University estimated that in Hawaii the annual direct costs to the economy attributable to smoking were in excess of \$1.1 billion, including workplace productivity losses of \$215 million, premature death losses of \$449 million, and direct medical expenditures of \$444 million. While the retail price of a pack of cigarettes in Hawaii is on average \$7.45, the combined medical costs and productivity losses attributable to each pack of cigarettes sold are approximately \$23.26 per pack of cigarettes.

Allocations to the Tobacco Prevention and Control Trust Fund were halved from 25 percent of annual Tobacco Settlement Funds received by Hawaii to only 12 ½ percent in 2001. Since then, allocations to the Trust Fund were cut in half again so that currently only 6 ½ percent of the Settlement Funds actually fund tobacco prevention, cessation and control programs.

Restoring the funds diverted from the Tobacco and Control Trust Fund to help Hawaii smokers and youth to cede from smoking, or to never start, will insure that future generations of Hawaii taxpayers will no longer have to subsidize tobacco industry profits through the payment of tobacco-related healthcare costs.

The structure of the Master Settlement Agreement payments from the tobacco industry to the state are based in part on national smoking rates. As smokers die, and tobacco-control efforts continue to successfully wean current tobacco users off their addiction and prevent

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new smokers from starting, payments from the industry to the state will drop, thus making those payments an unstable source of funding. Drops in tobacco control program funding as a result of drops in smoking rates would be not only acceptable, but a goal of those programs. A reduction in smoking rates, the death and disability caused by tobacco use, and its resulting economic costs should also be the goal of the state.

The American Heart Association strongly urges legislators to identify an alternative, more appropriate, stable source of funding for the programs outlined in HB 614, HD2. Tobacco settlement funds should be used to help those who are affected directly by tobacco addiction and tobacco industry marketing.

Respectfully submitted,

Donald B. Weisman

Hawaii Government Relations Director



PACT PARENTS AND CHILDREN TOGETHER
A FAMILY SERVICE AGENCY

TO: Senator Josh Green, M.D., Chair
Senator Clarence Nishihara, Vice Chair
Senate Committee on Health

Senator Suzanne Chun-Oakland, Chair
Senator Les Ihara, Vice Chair
Senate Committee on Human Services

Senator David Ige, Chair
Senator Michelle Kidani, Vice Chair
Senate Committee on Ways and Means

FROM: Haaheo Mansfield
Vice President of Programs
Parents And Children Together

RE: In Strong Support of HB 614 HD 2 Relating to Children

DATE: April 4, 2011

My name is Haaheo Mansfield. I am employed by Parents And Children Together (PACT) as the Vice President of Programs. As a part of my community service work, I am also a Governor appointed member of the State Council on Mental Health and am an ex-officio member of the Hawaii Early Intervention Coordinating Council. I am also a member of Pathways to Work, a program of Child & Family Service.

Through its Hana Like Home Visiting Program, PACT was once the largest provider of home visitation services to families identified as at risk for child abuse and neglect. The deficit economy forced closure of this once great program, recognized by the Department of Health as the premier provider of Healthy Start services in the state. I believe you each share in the commitment to bring back Healthy Start services, with the first step being to re-establish hospital based screening, assessment and intensive home visiting.

I realize you have a very difficult agenda ahead of you and that balancing budgets in a broken economy is a daunting task. Nonetheless, I encourage you to consider increasing the Tobacco Special Fund ceiling. Funding the existing Healthy Start services through passage of HB 614 HD 2 will enable the state to continue to receive federal funds for the Quality Improvement grant, sustain maintenance of effort and ensure matching funds for pending federal funds for home visiting through the Health Care legislation.

Thank you for the opportunity to provide testimony in **strong support** of HB 614 HD 2.. Your help is needed to protect the Tobacco Special Fund.

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Early Childhood Consultant

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AFFILIATIONS

Alliance for Children
and Families

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Testimony on HB 614, RELATING TO CHILDREN

Joint Senate Committees on Ways and Means, Health and Human Services

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Human Services Chair: Sen. Suzanne Chun Oakland

Human Services Vice-Chair: Les Ihara, Jr.

Wednesday, April 6, 2011, 2:45 p.m.

Conference Room 229

Testimony submitted by: Howard S. Garval,
President & CEO, Child & Family Service

Aloha, Chais Ige, Green and Chun Oakland, Vice Chairs Kidani, Nishihara, Ihara, Jr. and Committee members. I am Howard S. Garval, President & CEO of Child & Family Service, Hawaii's oldest and largest human service nonprofit organization with services on every island and touching the lives of 40,000 Hawaii residents from keiki to kupuna each year. I am testifying in support of HB 614.

First of all, I want to extend big mahalos to the legislature for preventing the total elimination of Hawaii's nationally recognized model Healthy Start home visiting child abuse prevention program. Last session the Legislature restored \$1.5 million in TANF funds to keep the remaining two programs alive in the state. These two programs are: the Hilo program provided by the YWCA of East Hawaii and the Leeward Oahu program that Child & Family Service provides. I also want thank you for the approval of the Emergency Budget and Reserve Fund (Rainy Day Fund) bill that provided \$1.5 million for Healthy Start. The intent of the Rainy Day funds was to supplement the TANF funds, but the TANF funds were never released, and the Rainy Day Funds kept these two remaining programs alive.

In the last two years the Maternal Child Health Branch (MCHB) of the Department of Health (DOH) has been implementing a federal Evidence-Based Home Visitation and program improvement grant it was awarded with Johns Hopkins University. Hawaii was one of only 17 states to receive this highly competitive grant because we were recognized for creating Healthy Start that was then replicated under the Healthy Families America banner in 37 other states. In awarding the grant to Hawaii, it was hoped that we would share our successes with the rest of the country. The great news is that this grant has helped move very good programs to an even higher level of excellence.

The Governor publicly touted Healthy Start during his campaign and was one of the original legislators to sponsor the first Healthy Start pilot program for which the Legislature appropriated funds. Now we have an administration that believes in Healthy Start which matches the Legislature's consistent support of the program. In addition we have worked closely with the Department of Health (DOH) on the bill and we are in agreement, unlike what happened with the previous leadership at DOH.

This bill proposes to first restore the hospital-based screening and assessment program that was eliminated at the beginning of FY 10 when Tobacco Funds were not released by the prior administration. This is a critical component for Healthy Start to assess families for risk of child abuse before there is ever a report of child abuse. The first priority would be hospitals that serve the geographic areas of the two existing programs. We are proposing to restore intensive home visitation services for the highest risk families only and to refer lower risk families to existing community programs that focus on parent education and support. The home visiting services are voluntary since you cannot mandate such services for families with no substantiated report of child abuse/neglect.

The Maternal Child Health Branch (of DOH) plans to evaluate the current two programs this year and expects outcome data that will demonstrate the efficacy of the work the two programs are doing. The plan will be to gradually build back the hospital-based screening and assessment and home visitation services in the highest need communities until a statewide program is restored. The metaphor I have been using is that of building a house. You start with a strong foundation and build up from there. I support the approach that MCHBs taking to ensure that every Healthy Start program is being delivered at a high performance level with positive and verifiable impact. In that way a strong foundation is the platform for a solidly built house rather than one that is structurally unsound (to complete the metaphor).

There is nothing more important that we can do as a state and for our keiki than preventing child abuse. At Child & Family Service our mission is strengthening families and fostering the healthy development of children so I think you can see why we strongly support HB614. Ask for your support of this bill to at least keep Healthy Start alive until we can build it back to a statewide program once again.

Mahalo for providing the opportunity to submit testimony.



Aloha United Way

Our Mission: Strengthening Families and Fostering the Healthy Development of Children



April 4, 2011



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*President and
Chief Executive Officer*

Re: **HB614** Hearing, Wednesday, April 6, 2011

Dear Committees on Health, Human Services, and Ways and Means,

I am writing on behalf of House Bill 614 pertaining to hospital based screening and assessment services serving communities having Healthy Start services. I stand in favor of this bill that aims to restore and maintain Healthy Start services in areas of critical need.

Evaluation data indicates that Healthy Start programs have demonstrated a 99% success rate in averting abuse and neglect and providing infants and their parental caretakers an opportunity for a healthy and positive relationship that is carried throughout the lifecycle.

The Healthy Start program that focuses on early childhood and prevention may ultimately save millions of state and federal dollars in areas related to special education, mental health services, substance abuse treatment, juvenile and adult corrections, and health care for chronic illnesses.

I strongly **support** this critically important legislation.

Mahalo,

Jon K. Matsuoka, Ph.D
President and CEO

The Twenty-Sixth Legislature, State of Hawaii
Hawaii State Senate
Senate Committee on Health
Senate Committee on Human Services
Senate Committee on Ways and Means
Testimony by
Early Learning Council
April 6, 2011
H.B. 614— Relating to Children

Chair Green, Chair Chun Oakland, Chair Ige, and Committee Members:

The Early Learning Council (“ELC”) offers this testimony in support H.B. 614.

Established under Act 14, First Special Session 2008, the Early Learning Council is entrusted with the development and administration of the state’s early learning system. The ELC seeks to establish a cohesive, comprehensive, and sustainable early learning system that ensures a spectrum of quality early learning opportunities for young children from their prenatal period until the time they enter kindergarten. As such, the ELC focuses upon four essential areas: Early Education and Care; Health; Parent Education and Family Support; and Workforce and Professional Development.

H.B. 614, which establishes a hospital-based screening and assessment and intensive home visitation program within the Department of Health, relates directly to the ELC’s focus areas of Early Education and Care; Health; and Parent Education and Family Support, and represents a significant step in establishing a comprehensive array of services for our most vulnerable children. The Early Learning Council strongly supports this bill.

Thank you for the opportunity to testify.

Respectfully Submitted,

Dr. Robert Peters
Chair, Early Learning Council

Testimony on HB 614, HD2 Relating to Children

Senator David Ige, Chair Ways and Means Committee

Senator Josh Green, Chair, Senate Health Committee

Senator Suzanne Chun-Oakland, Chair Senate Human Services Committee

April 6, 2011 @ 2:45 pm

Conference Room 229

**From: Gail Breakey, Executive Director
Hawaii Family Support Institute**

Good afternoon, Committee Chairs and Members. . I am Gail Breakey, Executive Director of the Hawaii Family Support institute testifying of behalf of the Institute and One Voice for Hawaii's Children in support of HB 614. . This bill adds provision of home visiting services to prevent child abuse to the existing Hawaii State Statute on child abuse prevention, and authorizes support for the two existing Healthy Start sites, to re-establish two sites and hospital based screening to engage the highest risk families in services in these communities. Prevention of child abuse in the first three years of life is more critical than at any other time.

1. Why Healthy Start services to avert child abuse and promote early child development for highest risk families need to be a priority:

Child abuse is a serious child health and social problem

- Nationwide and in Hawaii, **80% of all serious abuse and neglect is among children birth to five.**
- 43% of all deaths involve children under age one.
- **In Hawaii, about half of all CPS cases are among children under five**
- Research on early brain development shows that trauma, adverse experiences in early childhood are the root causes of many other social and health problems.
- Avertng early trauma and promotion of healthy development is critical to **school readiness, a major issue related to improving school performance. In Hawaii, only 24% of schools reported that the majority of their kindergarten children had adequate pre-literacy skills, a major key to school readiness.**

- **Millions of dollars in costs of special education, mental health services, substance abuse, juvenile and adult corrections and health care for chronic illness can be traced to child abuse and adverse early childhood experiences.**
- The Healthy Start program has shown over a **99% success rate in averting abuse and neglect** and getting vulnerable infants and toddlers off to a better start.
- The **Healthy Start home visiting services** to be restored **have been significantly improved** through the competitive Evidence-Based Home Visitation (EBHV) grant awarded to Hawaii.
- The **highly competitive Evidence Based Home Visitation grant of \$2.5 M over 5 years will be lost if the two existing programs are cut.**
- If existing programs are cut, **there will be no matching or maintenance of effort requirement for Hawaii to receive federal funds available** through the Affordability Healthy Care Act..

3. Restoration of universal screening provides an opportunity to engage the highest risk families in home visitation services and lays the foundation and entry point for organizing front end, early intervention services

- Hospital based assessments are critical to reaching high risk families before trauma occurs, in order to provide less costly and more effective services.
- Identification of families of newborns at risk is a point of intake to triage highest risk families into intensive home visiting services, and make referrals to a range of existing and needed services for vulnerable children to ensure they are safe, healthy and ready to learn in school
- Healthy Start, including the screening process, is a critical part of the administrations long term plan and commitment to a strong early childhood initiative and plans of the Hawaii Early Learning Council.
- All the research shows that restructuring resources to promote the emotional health and well being of young children is more effective than remediation of problems later, and prevention/early intervention will save money.

It is worth noting that while we spend approximately \$12,000/ year on education for older children, and \$24,000/ year for those needing special education, we **spend way less, under \$1,000 /year for children in the formative early years when the capacity for school success is being established.** We must invest in the safety, well-being and normal growth and development of vulnerable young children in order to achieve our goals in education and productive manpower for a competitive economy.

Thank you for the opportunity to testify on this legislation and for your favorable consideration of this bill.



To: The Honorable Josh Green, M.D., Chair, Committee on Health
The Honorable Suzanne Chun Oakland, Chair, Committee on Human Services
The Honorable David Y. Ige, Chair, Committee on Ways and Means
The Honorable Clarence K. Nishihara, Vice Chair, Committee on Health
The Honorable Les Ihara, Jr., Vice Chair, Committee on Human Services
The Honorable Michelle Kidani, Vice Chair, Committee on Ways and Means
Members, Senate Joint Committee on Health, Human Services, and Ways & Means
From: Trisha Y. Nakamura, Policy and Advocacy Director
Hrg: Senate Jt Committee on HTH/HMS/WAM; April 6, 2011 in Rm 229 at 2:45 p.m.
Re: **Comments re HB 614, HD 2: Relating to Children**

Thank you for the opportunity to provide comments on HB 614, HD 2 which will provide an appropriation to Healthy Start for FY 2011-12 and FY 2012-13 from the Tobacco Settlement Special Fund. The comments here are not directed against Healthy Start. Rather, we offer information about the Tobacco Settlement Special Fund and share our concern about the further erosion of funds away from tobacco prevention and treatment.

Hawai'i receives Tobacco Settlement moneys as the result of a settlement entered into between 46 states and the major tobacco companies to recover damages for tobacco-related health care costs paid by taxpayers because of the harms caused by tobacco. By joining the settlement, Hawai'i made a promise to the people of Hawai'i to reduce youth use of tobacco and to advance public health.¹ The Coalition's asks the Committee to remember the reason we have the tobacco settlement: Hawai'i residents lost their lives to smoking and because of the tobacco industry's interest in maintaining profits. We must work to make sure the next generation never experiences the suffering of those who died and those whom they left behind.

Hawaii's comprehensive tobacco control programs are working to make sure this doesn't happen. From 2002 to 2008, there are 42,300 fewer adult smokers in Hawai'i, saving 14,100 lives from tobacco-related deaths and saving our State an estimated \$402 million in direct medical costs. There is no mistake—this consistent dedicated source of funding from the Tobacco Settlement (from the tobacco industry which has cost our State billions of dollars in health-related costs) has resulted in lives and dollars saved.

¹ Hawai'i upon signing the settlement, agreed to "reduc[e] underage tobacco use by discouraging such use and by preventing Youth access to Tobacco Products" and avoid further cost of litigation to "achieve for [Hawai'i and its] citizens significant funding for the advancement of public health." (See Master Settlement Agreement, Recitals. Available at <http://ag.ca.gov/tobacco/pdf/1msa.pdf> (last visited Jan 28, 2010).

Although Hawai'i has made significant progress in reducing tobacco use and saving lives because of the investment in tobacco prevention and control, tobacco use remains a serious health issue. Tobacco continues to kill more people than alcohol, murders, AIDS, car crashes, illegal drugs and suicides COMBINED. In fact, lung cancer associated with tobacco use kills more women than breast cancer in Hawai'i. More than 1,000 Hawai'i youth become daily smokers each year. Smoking costs us over half a billion dollars per year in smoking-related health care costs and lost productivity. Clearly, the work of tobacco treatment and prevention is not over.

When Hawai'i started receiving tobacco settlement funds in 1999, 25% of the funds were dedicated to tobacco prevention and control efforts, 35% for the Department of Health, and 40% for the Rainy Day Fund. Since then, the portion for tobacco prevention has been cut down to 6.5%. A recent poll of Hawai'i residents indicates that 91% feel that it is important for a portion of the tobacco settlement funds to go to programs that prevent tobacco use amongst youth and help smokers quit and more than 80% want the amount of State funding for tobacco control programs to stay the same or increase.² We are concerned that this portion will continue to drop and concerned that we will see the end of resources for efforts that save lives and keep kids from tobacco.

Should the Committee pass this measure, we urge you to maintain the language in Section 3 that increases the ceiling appropriation in order to maximize the entire Settlement funds that Hawai'i receives and are distributed to tobacco prevention efforts.

Because of our concern for the people of the State that the Coalition urges the Committee to ensure funding for tobacco prevention and tobacco cessation work in perpetuity. All that stands between the tobacco industry and our kids is our prevention efforts. Thank you for the opportunity to comment on the funding for critical tobacco prevention and control funds. We ask that you continue funding for tobacco prevention and control via the Tobacco Prevention and Control Trust Fund so that these community-based services can continue. **Thank you for the opportunity to testify on this matter.**

The Coalition for a Tobacco Free Hawaii (Coalition) is the only independent organization in Hawaii whose sole mission is to reduce tobacco use through education, policy and advocacy. Our organization is a small nonprofit of over 3,000 organizations and members that work to create a healthy Hawaii through comprehensive tobacco prevention and control efforts. The Coalition started in 1996, under the auspices of the American Cancer Society. The Coalition, along with its founding members, played a key role in establishing the Tobacco Prevention and Control Trust Fund.

² QMark Survey, February 2011. "Public Attitude Towards Tobacco Settlement Funds".

February 16, 2011

The Honorable Senators and State Representatives
415 South Beretania Street
Honolulu, HI 96813

Dear House and Senate Members:

RE: HB614 and SB 925 SD1

Aloha Committee Members,

Because our Hawaii Healthy Start Program (HSP) focuses on the prevention of child abuse and neglect. It provides services to low income and vulnerable families with young keiki between the ages of 0-3. *We need to see if continue on the Island of Maui as well.*

The program has been cut incrementally starting on 2008 by 17% and again earlier in 2009 by 30% incurring layoffs, decrease in families served, and finally by July 2009 the **Maui, Molokai, and Lanai** HS program funds were cut 100% along with others in the State. *The lack of prevention threatens the increase in the Child Welfare System (CWS) for incidents of abuse and neglect.*

At present, The 1998 “ Adverse Childhood Experiences” (ACE) study by Dr. Vicent J. Felitti shows a high correlation between ACE and drug use, teen pregnancy, depression, suicide, incarceration, and chronic disease in adults leading to premature death. Further studies show that for every dollar spent in prevention 4 to 7 are saved. **One abused or neglected child, is one too many.**

We ask you to please listen and respond to the needs of the children and families of “Maui” for compassion, vision, and for what is ‘Pono’. Please advocate for the reinstatement of funds to include “Maui”, the outer and rural islands, which have not been supported.

Please restore Healthy Start statewide. I thank you for your time and attention and applaud you for your work and commitment during these times of challenge but also times of opportunity to make decisions which will have a positive and lasting effect on children, families and communities.

Sincerely,
Zina Andrade

Please do not publish my personal information:

green2 - Kealaonalehua

From: Linda Coble [lindacoble@mac.com]
Sent: Monday, April 04, 2011 11:35 AM
To: HTHTestimony
Subject: In favor of HB 614, HD2

Testimony on HB 614, HD2 Relating to Children

To:
Senator Josh Green, Chair, Senate Health Committee Senator Suzanne Chun-Oakland, Chair Sente Human Services Committee Senator David Ige, Chair Committee on Ways and Means
Re:
Wednesday, April 6, 2011
2:45 p.m.
Conference Room 229
State Capitol
Testimony From:
Linda Coble, Hawaii Family Support Institute Advisory Board 284-2000

Aloha and Mahalo for the opportunity to testify on behalf of HB 614, HD2 Relating to Children,

I am not a professional social worker or service provider, but I am a fierce advocate of the prevention of child abuse and neglect, and I have served as a volunteer as Board Director and Advisor with Healthy Start related organizations since the '80's. I heartily encourage passage of this bill to protect the existing Healthy Start services, hospital based screening and assessment services, and broaden the intensive home visiting services for high risk families.

The Healthy Start program has shown more than a 99% success rate in averting abuse and neglect, and getting our most vulnerable infants and toddlers off to a better start. The hospital based assessments have been critical to identifying high risk families BEFORE trauma occurs, and the services offered to our vulnerable children have helped to ensure they are safe, healthy and ready to learn in school. We must not wait until a child is harmed to react. Prevention is the key.

I believe in the mantra...pay now or pay later. Costs for the social, health and education challenges of our keiki will grow as they grow. Please give our vulnerable youngsters a Healthy Start, by preserving and expanding the services addressed in this bill. The highly competitive Evidence Based Home Visitation grant of \$2.5 million over five years will be lost, and there will be nowhere to place the Affordability Healthy Care Act federal funds, if existing programs are cut.

Mahalo for the opportunity to testify on this legislation. I know I am not alone, in looking forward to your favorable consideration of this bill.

With Hope and Aloha,
Linda Coble

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

Dear committee members,

I am the only person EID Facilitator (Early Identification) in the entire state of Hawaii. Even though funds were cut by former Governor Linda Lingle, Maui Family Support Services were and continues to be the only agency that served and continues to serve the parents who have their babies at Maui Memorial Medical Center, as well as families who are referred to us. Families who are going through incredible stressors during this hard economic time have a lifeline through my sitting with them and either tailoring resources for each family or offering services to those who are desperately in need of services.

Preventing child abuse and neglect has always been our number one priority, and I'm personally finding it heartbreaking to see how I'm receiving more and more CPS referrals. Isn't prevention better than intervention? By the time it's become intervention a baby or child has been hurt or neglected, and their innocence of the world has been stripped.

Please bring Healthy Start back to the state of Hawaii so that babies and children in our state can continue to be just that, babies and children without heartache or sadness.

Thank you for your time and consideration.

Sincerely,

Cindy Coleman-Jakubczak
EID Facilitator II

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

Dear Sir/Madam,

My name is Raenelle Coloma and I am writing this letter asking for your support in including the County of Maui as recipients of funding in the Healthy Start; Home Visitation; Department of Health; Appropriation HB 614, HD 2.

For the past 5 years I have serviced families through my position as a family support worker in the Enhanced Healthy Start program. Since the elimination of Healthy Start in our county, we have received a noticeable increase in the referrals of families to our program by the DHS-CPS system. In my opinion this is reflective of the absence of what I believe to be the very crucial Healthy Start child abuse intervention program.

Families in Maui County suffer and struggle through the same challenges as residents throughout the State of Hawaii does. Times are hard, folks are stressed and more and more support and resources in the community are becoming depleted. Yet, thankfully, leaders we have chosen to lead our State have recognized the GREAT need for child abuse prevention and the impact Healthy Start plays in that picture. For that reason, I humbly ask, that in SB 925/HB 614, you not forget the na keiki of Maui County as well!!!

Respectfully yours,

Raenelle Coloma

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of **Strong Support of HB 614 HD 2 -**

Hearing: April 6, 2011 @ 2:45pm

Dear Sir/Madam,

I am writing this letter asking for your support in including the County of Maui as recipients of funding in the Healthy Start; Home Visitation; Department of Health; Appropriation HB 614, HD2

As a young widow with three young children, I can personally express the importance of a strong support system. In my opinion this program has help families similar to mine, who struggle and suffer through many challenges sacrificed by living in our beautiful state of Hawaii. I cannot stress to you enough the benefits and positive impact it will have to offer this program to Maui families.

I sincerely believe that a healthy adult begins in a healthy home. A healthy home is the foundation of a healthy family. The emotional, mental and physical health of the family include the increase awareness of positive, nurturing parental skills; and knowledge that come from learning more about the prevention of child abuse and neglect (CAN). The Healthy Start/Home Visitation program would have a positive impact on the decrease of CAN on Maui. For these reasons shared, I ask that you include funding for Maui County in Healthy Start; Home Visitation; Department of Health; Appropriation SB925 / HB 614.

Respectfully yours,

Leinell Coloma-Nahooikaika

April 4, 2011

Ave Diaz

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

The Honorable Representatives and Senators
State of Hawaii, Joint Hearings
Twenty-Fifth Legislature
State Capitol
415 S. Beretania St.
Honolulu, Hawaii 96813

Subject: Letter of Strong Support of HB614, HD 2

Aloha Dear Legislators,

My name is Ave Diaz and I am writing to urge you to support funding for the reinstatement of the Healthy Start Home Visitation program on all islands in the state of Hawaii. I believe thinking outside the box is key; increasing taxes on non essential items such as alcohol, tobacco and soda drinks are viable measures that could generate revenues to fund Healthy Start during these hard economic times. Adding a few pennies per dollar on real estate and tourism transactions are also a possibility.

As a social worker, I have first hand experience with families in need of the safety net provided by the Family Support Workers in the Healthy Start program. The 5 Protective Factors needed for adequate family functioning to provide children better chances of growing into productive and healthy citizens are:

- 1- Bonding & Attachment that leads to Social and Emotional Competency.
- 2- Knowledge of Child & Youth Development and Parenting skills.
- 3- Parent Resiliency, ability to cope with stressors appropriately and to recuperate.
- 4- Social Connections.
- 5- Concrete Supports (housing, food, adequate and fair employment, financial and other resources)

The Healthy Start program ensures that families have guidance and support in achieving and maintaining these Protective Factors, avoiding future state expenditures over problems with child abuse and neglect, ill health, poor academic functioning, social misconduct, poverty, domestic violence, substance abuse and dependency on the state welfare system. Funding Healthy Start is a wise and necessary investment for our communities!

In this time of greater need, aside from parents and children falling through the cracks, agencies and staff workers providing the safety net services have been downsized, with workers having to apply for subsistence benefits themselves. "Penny wise and pound foolish" policies will in the long run not only drain finances for the state, but will cause human suffering that could be avoided. As legislators, I urge you to protect our most vulnerable populations through adequately funding safety net programs such as Healthy Start!

Mahalo for your service to the people of Hawaii!

Ave Diaz

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

The Honorable Senators and State Representatives
415 South Beretania Street
Honolulu, HI 96813

Dear Honorable House and Senate Members of the Humans Services/ Health and Ways and Means Committies:

RE: Urging the Legislature to support HB 614, HD2

I am writing to urge the state Legislature to support Early Identification (EID) and Healthy Start (HS) Home Visitation services on the neighbor islands of Lanai, Maui and Molokai. These services are critically important to our neighbor islands for finding at risk families and helping to provide their newborns, infants and toddlers a Healthy Start in life.

Before funding cuts, EID and the Healthy Start program helped ensure that Maui County's children had a safety net to protect them from possible maltreatment, thus reducing expensive interventions for the state in the future.

The islands of Oahu and Hawaii already have up and running recipient programs and so does Maui County because the need is there. Without state support, the existing services on the neighbor islands will not be able to continue running on dwindling non-profit agency emergency funds.

Lanai, Maui and Molokai are in dire need of funding support to expand and secure early childhood intervention and education programs through EID and Healthy Start. Thank you for your attention to this important issue.

I have worked in the Heathy Start program, here on the island of Lanai and have helped many young families. Because of funding cuts I had lost my position as Healthy Start homevisitor and the many families that I was working with was sad because of the lack of programs offered on

Lanai for these young children. Parents were able to get developmental help for their children. Learn activities to keep their children on their developmental milestones to prepare them for preschool. Parents were able to learn better skills of disciplining their children, in teaching children the right thing to do instead of hitting or yelling at them the way they were taught growing up, preventing child abuse and neglect.

A Mom from the Philippines said that she was grateful for being able to participate in Healthy Start Program when it was available on Lanai. Mom never knew that she could work with her child from infant, or even talk to her child while still in the womb. As she had 2 children before coming into the Healthy Start program, this Mom noticed the difference between her children born in the Philippines and her child now. Mom says that she is really doing well in school and really loves to learn and able to get along with other children. Mom feels that her child is really exceling in school thanks to the help of our program. Because Healthy Start was able to help Mom get the skills she needed to teach her child.

Healthy Start Program is very important especially here in Hawaii and especially on the Tri-Islands of Maui, Lana'i and Moloka'i where resources and programs are already so limited.

I feel that it's really important to work with Parents with very young children....the children are so impressionable..... the future of Hawaii.
Doing a lot of prevention now in helping families and children....it will save dollars for the future of Hawaii.

I've also noticed some of the families that I have worked with in the past. Because of funding cut, the families had to be told that we no longer had a program and no other program was available. These children's behaviors have gotten worst and parents are referred to more critical programs because now the children are older, the children are behaving unruly, having difficulties in school, the parents experiencing more stress in their daily lives.

So please Support SB925 and Please Keep Healthy Start Funding and Please Include Maui County.
Your Consideration is greatly appreciated.

Respectfully,

Leonora Etrata
P.O. Box 630002
Lanai City, HI 96763
808-559-6483
nora@mfss.org

March 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

Dear Senate Members:

RE: Urging the Legislature to support HB614 HD2

I am writing to urge the state Legislature to support Early Identification (EID) and Healthy Start (HS) Home Visitation services on the neighbor islands of Maui, Lanai and Molokai. These services very much needed in these islands.

Before funding cuts, EID and the Healthy Start programs helped ensure that Maui County's children had a safety net to protect them from possible maltreatment, thus reducing expensive interventions for the state in the future. Healthy start provided needs to our community that not only bettered the lives of our children but helped to improve the quality of life for the parents as well. With the economy the way it has been we have all seen how it has affected the residents of Hawaii not only financially, but mentally, and physically as well. We desperately need these programs to be a support system for the people of Maui County

As a home visitor for the early head start program myself, I am able to see first hand the trials many of our Hawaii families face. Maui in particular is one of the most expensive island in the entire state. From food to housing our Maui families face extreme hardship. I have also encountered a numerous amount of times where the family I'm visiting has asked me if I can not only help them but ask for help for their sister, or cousin, or friend. Unfortunately, I have to tell them that there is just not enough room and they need to go on a waitlist. This particular situation saddened me deeply because about 1 month later the family member that was needing help tried committing suicide. It often bothers me when I think about what could have happened if we were able to help. If we had the funding to service more families could we have saved this mother from possibly taking her life.

This is just one example of the problems we see here in Maui. The need for healthy start is definite and the problems that are occurring are STATEWIDE. This means EVERY island needs these services.

Sincerely,

Makana Garaganza
305 Mohalu Street
Kahului, HI 96732

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair
COMMITTEE ON HUMAN SERVICES
Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of **Strong Support** of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

The Honorable Senators and State Representatives
415 South Beretania Street
Honolulu, HI 96813

Dear House and Senate Members:

RE: Urging the Legislature to support HB614, HD 2

The Hawaii Healthy Start Program (HSP) focuses on the prevention of child abuse and neglect. It provides services to families with young keiki between the ages of 0-3.

The program has been incrementally cut starting in 2008 and again in 2009. Which incurred layoffs, decrease in families served, and finally by July 2009 th Maui, Molokai, and Lanai HS program funds were cut 100% along with others in the state. Lack of prevention could increase incidents of abuse and neglect in the the Child Protective Services(CPS)systems.

Having the experience as a home visitor myself I have encountered many families with various needs of services ranging from financial to mental/physical support. I have had the pleasure of being a part of a child from the day she was born until her 3rd birthday. I've watched her crawl, her stand, and even witnessed her first words. I have also been able to watch her mother grow as a person and helped her in gaining a new self confidence. Because of the bond I've made with many families I am fortunate enough to keep in touch with many of my participants long after they have left the program. These children are succeeding in school and I'm blessed to know that they have a brighter future because of the services I was able to provide.

However, due to the funding cuts of Healthy Start I've also been able to see the affects in has had on the families of Maui County. I've seen fathers who were active participants in their child's life are now incarcerated due the lack of positive support and services that Healthy start was able to provide. I've also witnessed divorce, domestic violence, and child abuse occur once these program have been eliminated.

The need for Healthy Start in Maui County is crucial to the success of our state. The people of Hawaii need the support that these programs are able to provide.

We ask you to please listen and respond to the needs of children and families of Maui County.

Lynell Gonsalves
18 Kahoea Pl.
Kula, Hi 96790

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

The Honorable Senators and State Representatives
415 South Beretania Street
Honolulu, HI 96813

Dear House and Senate Members:

RE: Urging the Legislature to support HB614, HD 2

I am writing to urge the state Legislature to support Early Identification (EID) and Healthy Start (HS) Home Visitation services on the neighbor islands of Maui, Lanai and Molokai. These services are critically important to our neighbor islands for finding/talking with the "at risk" families and helping to provide their newborns, infants and toddlers a Healthy Start in life.

We are currently **still providing** the Healthy Start services since the elimination of Healthy Start funding back in 2009. Our board of directors approved keeping this vital program alive since the elimination of Healthy Start back in 2009. We have a long waiting list but we are providing the services in the same manner.

Before funding cuts, EID and the Healthy Start program helped ensure that Maui County's children had a safety net to protect them from possible maltreatment, thus reducing expensive interventions for the state in the future.

I currently work under Enhanced Healthy Start as the registered nurse and child development specialist. The number of families Enhanced Healthy Start services have increased 33% since the elimination of funding for Healthy Start on Maui. Enhanced is also servicing more and more families lacking the basic resources including housing, food, and safe childcare. They are running purely on survival alone and therefore their families are not getting the adequate support to enrich the lives. They are stuck going from foodbank to foodbank while the food stamp benefits take over 2 months. They are living on other's couches and rooms to survive which they cannot even meet at the end of the month. We are servicing these types of families which used to (before the Healthy Start funding elimination on Maui) be lower numbers and now it has become exponential. Many of these Enhanced Healthy Start families would not be in the system if Healthy Start was in place once again. There is no other long term program for 0-3 years old besides Early Head Start which faces a long waitlist of willing parents who want the best for their keiki but the support and expansion money is not there. In turn, families who would have received the support to keep them from going into the CPS system through Healthy Start have gone without and

our keiki are the ones suffering the consequences. The system needs to look back to see what worked and not reinvent the wheel so to speak. Please support and reinstate EID (screening all parents after delivery) and Healthy Start services in Maui County as well as the other islands in the state of Hawaii.

The islands of Oahu and Hawaii already have up and running recipient programs and so does Maui County because the need is there. Without state support, the existing services on the neighbor islands will not be able to continue running on dwindling non-profit agency emergency funds.

There was a focus group recently 2/11/11 at QLCC on Maui and the consensus of community wide partners that Healthy Start is in dire need on the outer islands to keep more families from entering the CPS system. Those families (CPS involved) cost exponentially more money for all tax payers than all the Healthy Start programs combined on all the islands.

Maui, Molokai and Lanai are in dire need of funding support to expand and secure early childhood intervention and education programs through EID and Healthy Start. Thank you for your attention to this critical issue.

Sincerely,

Kathi Jones

7600 Hana Road

Hana, HI 96741

808-298-9062 or 800-578-3144

kahea77@yahoo.com

April 4, 2011

The Honorable Senators
Of the Health, Human Services and the Ways and Means Committees
415 South Beretania Street
Honolulu, HI 96813
Twenty-Fifth Legislature
State Capitol
415 S. Beretania Street
Honolulu, Hawaii 96813

Subject: Letter of Strong Support of HB 614 HD2 - Healthy Start; Home Visitation; Department of Health Appropriation

I am writing to urge the state Legislature to support Early Identification (EID) and Healthy Start (HS) Home Visitation services within the State. These services are critically important for finding/talking with the "at risk" families and helping to provide their newborns, infants and toddlers a Healthy Start in life.

As a pregnant 18 year old was invited to participate in the Healthy Start program. From my home visitor I learned the importance of prenatal care, immunizations, fist dentist visits, reading, and routines. She encouraged me to set goals, go to college and eventually move to Maui.

In 2001, I became a home visitor in the Healthy Start program. I've heard many stories and seen many families make great changes in their lives. These changes didn't happen because of me, **but because of a program that is focused on children and families**. I may have been the tool, but without the funding to provide the opportunity for these families to learn and grow those changes would not have happened.

Sometimes, these changes and growth are not measurable in the ways that we would like to see things measured, but that does not mean they are not real or unimportant.

In these tough times, it is understandable that we all must make sacrifices, however the reduction of these important services has left an impact in our Maui County community. In 2008 Healthy Start in Maui County served over 250 families a month. Over the next year services were decimated and eventually discontinued in Maui County. Only 43 families successfully transitioned into other Home Visiting programs, including a program operated by Maui Family Support Services with no state funding, of those who were unable to transition to other services, many later became involved with Child Welfare Services and were then seen by the Enhanced Healthy Start program.

The EID program of Maui County saw over 95% of the families who gave birth a Maui Memorial Medical Center before this service was closed. Seeing over 1000 people a month, this important service provided a valuable service to our community. Not only in referring families directly to Healthy Start, but providing valuable resource information for every family seen. I have met many families who remember the EID team members visiting them at the hospital and have heard how much that information and support helped them in caring for their newborn.

As you decide on how to vote please consider the many families who have had a positive experience because of Healthy Start, many including myself have been able to make many positive changes in the lives of our families and children. I understand that funds are tight, but the cost of spending on prevention now, will save much more in intervention later. Restoring these funds Statewide will see a significant impact in the positive outcomes for children and families.

Sincerely,

Daphne Ladia
Wailuku, Maui

green2 - Kealaonalehua

From: Doris MacFarlane [Doris@mfss.org]
Sent: Monday, April 04, 2011 2:49 PM
To: HTHTestimony

April 4, 2011

Testimony for Hearing for HB 614, HD 2 on Wednesday, April 6 at 2:45 PM in Conference Room 229 of State Capitol:

RELATING TO CHILDREN.

Establishes a hospital-based screening and assessment and intensive home visitation program within the Department of Health. Increases the Hawaii Tobacco Settlement Special Fund (Special Fund) ceiling. Appropriates funds from the Special Fund for hospital-based screening and assessment and intensive home visiting services. Appropriates funds from the Temporary Assistance for Needy Families Fund for intensive home visiting services. Effective July 1, 2030. (HB614 HD2)

In Strong Support of HB 614, HD 2

COMMITTEE ON HEALTH

Senator Josh Green, M.D., Chair
Senator Clarence K. Nishihara, Vice
Chair

COMMITTEE ON HUMAN SERVICES

Senator Suzanne Chun Oakland, Chair
Senator Les Ihara, Jr., Vice Chair

COMMITTEE ON WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Dear Legislators:

The State-wide Healthy Start Program (HSP) focused on the prevention of child abuse and neglect. It provided services to at-risk and vulnerable families with young keiki between the ages of 0-3 years.

Before State funding cuts, EID (Early Identification-the hospital-based screening portion) and the Healthy Start Home Visiting program helped ensure that Maui County's children would be protected from possible maltreatment, thus reducing expensive interventions by the State in the future. Because the Board of Directors of Maui Family Support Services, Inc. (MFSS) authorized the spending of emergency funds, MFSS maintained provision of EID and Home Visiting services on Maui. There was no break in service on Maui after EID and Healthy Start Home Visiting Services were eliminated by the State of Hawaii for Maui County, although many less families are receiving services. There is a waiting list of families who need services.

I ask you to please listen and respond to the needs of the children and families of Hawaii. Please advocate for the reinstatement of funds for the EID and Healthy Start programs, **to include programs on all neighbor islands.**

Doris MacFarlane
2663 Akalani Loop
Makawao, HI 96768

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April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair
COMMITTEE ON HUMAN SERVICES
Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

Thank you for allowing me this opportunity to convey to everyone the importance of the funding for the Healthy Start Program. Because of the positive impact it has made to so many families, I am requesting this program be restored to the island of Maui & State wide. I was a former Home Visitor in the Healthy Start Program on the island of Maui. Personally, I have never experienced what this program brought to families compared to other programs. Unfortunately, when Maui lost the funding for the Healthy Start Program, many of the families I worked with was left with no support & critical information for their well-being. One parent had a history of child & psychological abuse and she was determined to break the cycle & not put upon her toddler what she went through. In this case it sadden me very much as I was the one who broke the cycle by not being able to provide her & her family the support & education they so willingly accepted. I wonder if her toddler have any behavior concerns that's out of the ordinary; is she mimicking her parents when they argue; is mom's self-esteem at the level it was prior to the demise of the Healthy Start Program. Every so often she contacts me as there isn't anyone else she can turn to, trust, & receive information that helped her family.

Another parent I worked with was experiencing emotional abuse from her partner & with a newborn baby things were at a breaking point for her. She had very unrealistic expectations of her baby & expected her baby to know when she was tired & needed to sleep during the night, & when to be quiet so she could do chores. Through the Healthy Start Program she received counseling for her emotional abuse & post-partum depression, & there was someone who was by her side when she required help with medical professionals. In addition, this mom received critical information & education regarding child development and she was finally at a point where she understood-babies cry for a reason & this could mean her baby is either hungry, sick, needed a clean diaper, or just wanted to be cuddled. Similar to the other parent just as progress is being made her program was terminated due to the end of Healthy Start on Maui.

The stories I shared is just a few & I hope you will be able to restore the Healthy Start Program on Maui and State wide so families such as the ones I described can live a healthy & happy life, & most importantly raise healthy children who will succeed in whatever they pursue. It would be extremely frustrating and sad to hear families that could have benefited from Healthy Start and wasn't, and is now in prison, lost custody of their child, or the most devastating would be to hear of a child's death.

Page 2

RE: Letter of Strong Support for SB 925

The Healthy Start Program does work for families & they're willing to participate & improve the lives of their families. Unfortunately not everyone in Hawaii comes from a healthy & functional family unit, Healthy Start is definitely the link that will enable families to better their lives. Thank you for this opportunity & I hope your decision will be to restore the Healthy Start Program State wide.

Sincerely,

Renee Morris
Kahului, HI

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair

Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;

Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair

Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

Subject: Letter of Strong Support of HB 614, HD 2 - Healthy Start; Home Visitation;
Department of Health Appropriation

I am writing to urge the state Senators to fund the existing Early Identification (EID) and Healthy Start (HS) Home Visitation services on Maui. These services have been critically important when identifying "at risk" families and providing subsequent in-home services to newborns, infants and toddlers to get a Healthy Start in life.

On a stipend, Maui Family Support Services Inc. (MFSS) has maintained these vital services on Maui island beginning with a long established relationship with the Maui Memorial Medical Center, Pediatric services. Parents of newborn infants identified as having "high risk" behaviors who cannot meet eligibility requirements for the Federal Early Head Start Home Based services nor the DHS/CPS funded home visiting services, are offered in-home visits on a voluntary basis. These families fall into a precarious gap.

Between July 1, 2010 and February 16, 2011 MFSS EID has screened approximately 716 new mothers. As of July 1, 2011, without State funding, MFSS can longer bear the cost of this Early Identification service and subsequent home visiting program for the families falling into this ever widening gap.

I urge each of you to consider how a little will go such a long way. MFSS has already demonstrated how big of a "bang" can be gotten for a "buck." Please include Maui County in the proposed allocation of TANF and Rainy Day Fund monies for these crucial services.

Glenna Okamura

Home Visiting Supervisor

Maui Family Support Services, Inc.

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair
COMMITTEE ON HUMAN SERVICES
Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.
COMMITTEE OF WAYS AND MEANS
Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

Dear Senate Members:

RE: Urging the Legislature to support HB614, HD2 with amendments to include Appropriations for Maui County.

I am writing to urge the state Legislature to support Early Identification (EID) and Healthy Start (HS) Home Visitation services on the neighbor islands of Maui, Lanai and Molokai. These services are critically important to our neighbor islands for finding at risk families and helping to provide their newborns, infants and toddlers a Healthy Start in life.

Our Hawaii Healthy Start Program (HSP) focuses on the prevention of child abuse and neglect. It provides services to low income and vulnerable families with young keiki between the ages of 0-3.

The program has been cut incrementally starting on 2008 by 17% and again earlier in 2009 by 30% incurring layoffs, decrease in families served, and finally by July 2009 the **Maui, Molokai, and Lanai** HS program funds were cut 100% along with others in the State. The lack of prevention threaten the increase in the Child Welfare System (CWS) for incidents of abuse and neglect.

I have worked with numerous families throughout the communities and have experienced great fulfillment whenever a family has moved from a crisis situation to a stable one. I will never forget this one mom who got released from prison at the entry of the Healthy Start Program. She was scared, alone, and wasn't sure if she wanted a worker to come to her home and visit with her and her baby. Her husband was incarcerated at the time, and she was experiencing financial hardship. After years of being involved with the Healthy Start Program and all it had to offer, this mom made a statement to me that I will never

forget. She stated, "If it wasn't for the Healthy Start Program, she would have not been able to raise her child the way she did, become self sufficient, move on to a better life, and also she was able to share all her learning experiences from Healthy Start with her husband (even while he was in prison). The outcome for her and her family was profound, and because of it, she is a devoted advocate for Healthy Start.

I have also seen numerous young, single moms pursue their schooling and careers even after having their babies, because of the impact of the Healthy Start Program.

I have seen a lot of my past participants and their babies (now grown), doing very well, because of the Healthy Start Program.

At present, The 1998 "Adverse Childhood Experiences" (ACE) study by Dr. Vicent J. Felitti shows a high correlation between ACE and drug use, teen pregnancy, depression, suicide, incarceration, and chronic disease in adults leading to premature death. Further studies show that for every dollar spent in prevention 4 to 7 are saved. One abused or neglected child, is one too many.

We ask you to please listen and respond to the needs of the children and families of Hawaii for compassion, vision, and for what is 'Pono'. Please advocate for the reinstatement of funds to include the outer and rural islands, which have not been supported.

Patty Paranada

Kahului, Maui, HI

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

The Honorable Senators and State Representatives
415 South Beretania Street
Honolulu, HI 96813

Dear House and Senate Members:

RE: Urging the Legislature to **support HB614, HD 2**

I am writing to urge the state Legislature to support Early Identification (EID) and Healthy Start (HS) Home Visitation services on the neighbor islands of Maui, Lanai and Molokai. These services are tremendously important to our neighbor islands for finding at risk families and helping to provide their newborns, infants and toddlers a Healthy Start in life.

Our community is in great need of our services. As an example of that, one of our previous participants - who speaks English as a second language - wasn't sure when and where to take her four children to doctor's visits, that is for medical and dental services, likewise how to obtain help with monthly food expenses in order to provide basic care and a healthy life for her children. I feel honored to say that our program was able to assist her with that as well as many other families in similar condition, by providing referrals, assistance to fill out documentations, schedule appointments on their behalf and provide transportation as needed. We also play an important role on educating the families about nutrition and safety. As another example, we have encountered a case of an 18 month-old toddler being given soda by his parents several times on a daily basis. The home-visitor was able to instruct the family about the dangerous consequences that it could have on the child's physical, as well as oral health. As mandated reporters, we are able to be a "voice" to our "fragile" Keikis who cannot always speak for themselves. Please we need your help to continue making a difference in the lives of our community.

Support

April 4, 2011

The Honorable Senators
Of the Health, Human Services and the Ways and Means Committees
415 South Beretania Street
Honolulu, HI 96813

Dear Senators:

RE: HB614, HD 2

I am presenting this testimony to urge the State Legislature to include Early Identification (EID) and Healthy Start (HS) Home Visitation services for the neighbor islands of Maui, Lanai and Molokai. These services are critically important to Maui County for finding at risk families and helping parents to provide their newborns, infants and toddlers with a Healthy Start in life.

Before the Healthy Start funding cuts, EID and Healthy Start ensured that Maui, Molokai and Lanai children also had a safety net to protect them from possible maltreatment, thus reducing expensive interventions for the State in the future. After the funding cuts, there has been a 33% increase in the referrals made to the Enhanced Healthy Start program, which serves families who have already been confirmed for child abuse and neglect. *It is much more expensive to intervene with families who have already abused their children, than to prevent child abuse from occurring in the first place.* The Healthy Start Program identifies and provides support to at-risk families—teen parents, low-income families, families with a history of mental health, domestic violence or substance abuse problems—and provides them with the education and support to overcome these challenges. Without continued State support, the remnants of the Healthy Start Program, as it currently exists on Maui, Molokai and Lanai will not be able to continue to operate on dwindling non-profit agency emergency funds after 6/30/11.

Maui, Molokai and Lanai families are in dire need of funding to expand and secure early childhood intervention and education programs. I urge you to also remember Maui County and its *keiki* in the appropriation of money for Early Identification (EID) and Healthy Start (HS) programs, as you have done in other areas of our State.

Thank you for your attention to this important issue.

Sincerely,

Antoinette Rodrigues, MA

Antoinette Rodrigues, MA

35 Holomakani Drive

Kula, HI 96791

808-264-9392

arodrigues@hawaii.net

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair

Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;

Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair

Senator Michelle Kidani, Vice Chair

Subject: Letter of **Strong Support of HB 614 HD 2 -**

Hearing: April 6, 2011 @ 2:45pm

Dear Legislators:

Advocacy in keeping Healthy Start services on Maui to continue profound positive effects and much needed safety nets for our community...

Maui Family Support Services "MFSS" Board of Directors of Maui Family Support Services, Inc. MFSS authorized the spending of emergency funds, MFSS maintained provision of EID and Home Visiting services on Maui. There was no break in service on Maui after EID and Healthy Start Home Visiting Services were eliminated by the State of Hawaii for Maui County, although many less families are receiving services, There is a waiting list of families who need services.

Please include all the neighborhood islands especially Maui, to keep the continuity of the Healthy Start Program at Maui Family Support Services.

FACTS

*According to economist James Heckman (NYT op-ed, 7-29-08) "By age five, it is depressingly possible to predict who will finish school and college and who will not" This has a real impact on development of human capital and the overall economy.

* Healthy Start is the only home visiting service for child abuse prevention in Maui County and it has provided services for over 28 years.

* Data from research completed here in Hawaii with the Healthy Start Program show that for anxious mothers, HS participation produced a 60% decrease in substantiated child maltreatment, and a 54% decrease in neglectful behavior toward the child.

* 99.3% of families participating in Healthy Start for a year are NOT confirmed for child abuse or neglect.

*The Federal Administration for Children and Families awarded a 2.5 million dollar grant for 5 years to support and sustain Healthy Start (HS) in Hawaii, one of only 17 sites in the nation. They noted that Hawaii's HS is a model for best practice in the prevention of child maltreatment. They chose Hawaii HS for the strong collaboration between state agencies, community providers, and independent research team.

*Economist David McClain, former UH president, conducted a study and found a 3:1 cost benefit of Healthy Start over child welfare and other short term services. Nationally, studies on early intervention services show a cost benefit ratio ranging from 4:1 to 7:1.

*Johns Hopkins University's Elizabeth McFarlane, PhD, MPH states:

"Research has established that prevention programs save lives, prevent child maltreatment, promote child health, development and school readiness, and that these same programs save tax payer dollars by preventing school failure, delinquency, and incarceration in children growing up in families experiencing disadvantage and stress."

Please reinstate funds for the EID and Healthy Start Programs on all neighbor islands.

Much Mahalo for your kind attention,

Tammy Ruiz
43 Mo'olu Street
Wailuku, Hi 96793

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

I am writing to urge the state Legislature to support Early Identification (EID) and Healthy Start (HS) Home Visitation services on the neighbor islands of Maui, Lanai and Molokai. These services are critically important to our neighbor islands for finding at risk families and helping to provide their newborns, infants and toddlers a Healthy Start in life.

Before funding cuts, EID and the Healthy Start program helped ensure that Maui County's children had a safety net to protect them from possible maltreatment, thus reducing expensive interventions for the state in the future.

Through my 5 years of experience in this field, I have seen first hand the tremendous work that we do to help babies and their families in our Maui community. **Literally, it can mean their survival.** Families who are "English as a Second Language" have so many questions and needs too. We also provide them with the resources, emotional support and help needed for raising healthy and happy families.

Maui, Molokai and Lanai need funding support to expand and secure early childhood intervention and education programs through EID and Healthy Start. All our little ones deserve this. Please help!

Sincerely,

Arlene Tendo

Parent/Child Educator
Maui Family Support Services

April 4, 2011

COMMITTEE ON HEALTH

Senator Josh Green, M.D; Health Chair
Senator Clarence K. Nishihara; Vice Chair

COMMITTEE ON HUMAN SERVICES

Chair, Senator Suzanne Chun Oakland;
Vice Chair, Les Ihara, Jr.

COMMITTEE OF WAYS AND MEANS

Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Subject: Letter of Strong Support of HB 614 HD 2 -

Hearing: April 6, 2011 @ 2:45pm

To The House Senate,

I'm writing this letter in support of the Healthy Start Program and requesting that funding be available for Maui County which includes Molokai and Lanai. Despite the cuts in funding we continue to provide services to struggling families.

In the past years I've supported and witness so much success stories of young families going through raising their children and accomplishing their goals. With the support of the Healthy Start Program parents gain self esteem and learn to raise a healthy family and children and be active in our community. Parents teach their children right from wrong. Children learn to be respectable learners. Parents also learn the developmental milestone of their child with the support of Healthy Start Program.

Please help us by supporting Bill # HB614, HD 2 so we can continue to provide services to families on Maui, Molokai and Lanai.

Mahalo,

Corinne Young PCE

Maui Family Support Services

Molokai Early Headstart-553-8114

175 Ehilani Street
Makawao, HI 96768
April 5 2011

Re: In Strong Support of HB614 Relating to Children

Report Title: Healthy Start; Home Visitation; Department of Health; Appropriation
Establishes a hospital-based screening and assessment and intensive home visitation program under the Department of Health; appropriates funds from the tobacco settlement special fund and the temporary assistance to needy families' fund.

Testimony in Support of HB614, Hearing April 6,m 2011 at 2:45 PM, Conference Room 229 State Capitol

The Honorable Senators

COMMITTEE ON HEALTH
Senator Josh Green, MD. Chair
Senator Clarence K. Nishihara, Vice Chair

COMMITTEE ON HUMAN SERVICES
Senator Suzanne Chun Oakland, Chair
Senator Les, Ihara, Jr., Vice Chair

COMMITTEE ON WAYS AND MEANS
Senator David Y. Ige, Chair
Senator Michelle Kidani, Vice Chair

Dear Senate Members:

I am strongly requesting the Legislature to support HB614 and to include appropriations for Maui County. Maui Family Support Services, Inc has established programs, but continued funding is crucial to keeping the services alive for our families.

Please permit me to describe what happens when a Healthy Start visitor intervenes. Once a family agrees to weekly home visits and the intake information indicates the family is eligible for services, follow up visits provide support for the individual care plan that may include community referrals to Women, Infant, and Children nutrition supplements, housing, medical and dental care. The home visitor provides child education to nurture the child's development, activities that teach the parent how to nurture their child, enhance brain development, communication, and personal social skills. Weekly visits continue until the child reaches 3 years old.

Home visiting programs have shown to be effective in preventing child abuse. Maui, Molokai and Lanai are in dire need of funding support to secure early childhood intervention and education programs through EID and Healthy Start. Thank you for your attention to this important matter.

Support Bill HB 614, HD 2

Sincerely,

Barbara A. Tanner
Barbara A. Tanner, MS, APRN
Pediatric Nurse Practitioner
bmauigirl2000@yahoo.com