



## Replicating the Nurse-Family Partnership

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### Nurse Family Partnership

- Prenatal and infancy home visiting by nurses
- Focused on low-income mothers with no previous live births
- Clarity in goals, objectives, and methods
- Activates and supports parents' instincts to protect their children
- Strengths-based








### Nurse Family Partnership's Three Goals

1. Improve pregnancy outcomes
2. Improve child health and development
3. Improve parents' health and economic self-sufficiency

### Trials of Program

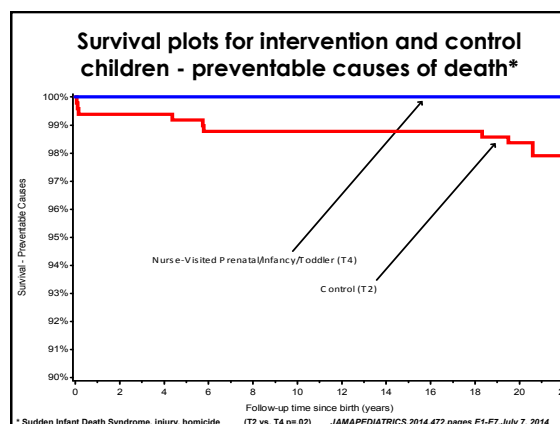
Elmira, NY 1977	Memphis, TN 1987	Denver, CO 1994
		
N = 400	N = 1,138 and N=743	N = 735
<ul style="list-style-type: none"> <li>• Low-income whites</li> <li>• Semi-rural</li> </ul>	<ul style="list-style-type: none"> <li>• Low-income blacks</li> <li>• Urban</li> </ul>	<ul style="list-style-type: none"> <li>• Large portion of Latino families</li> <li>• Nurse versus paraprofessional visitors</li> </ul>

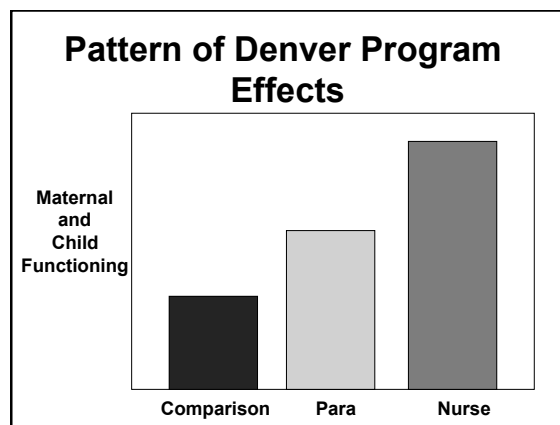
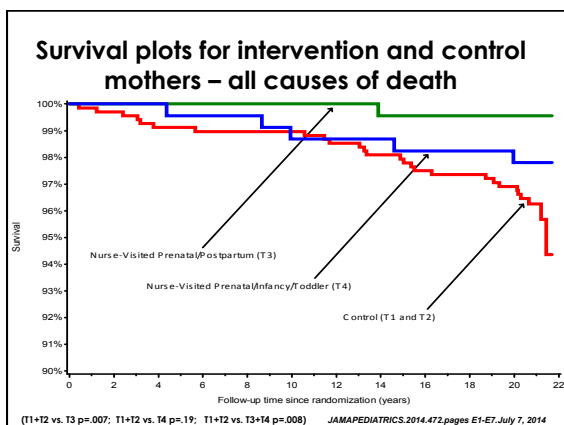
### Consistent Results Across Trials


- Prenatal health
- Children's injuries
- Children's language and school readiness (low resource mothers)
- Children's behavioral problems
- Children's depression/anxiety
- Children's substance use
- Maternal Impairment due to substance use
- Short inter-birth intervals
- Maternal employment
- Welfare & food stamp use





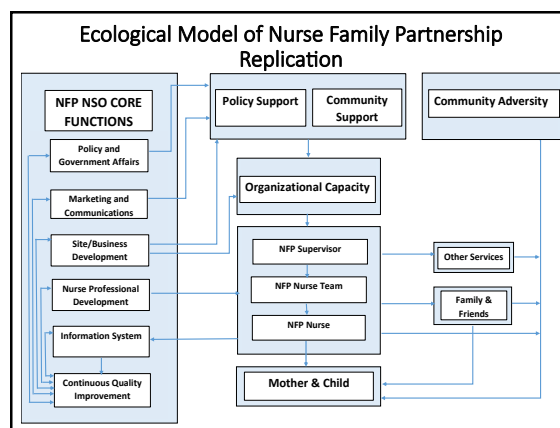






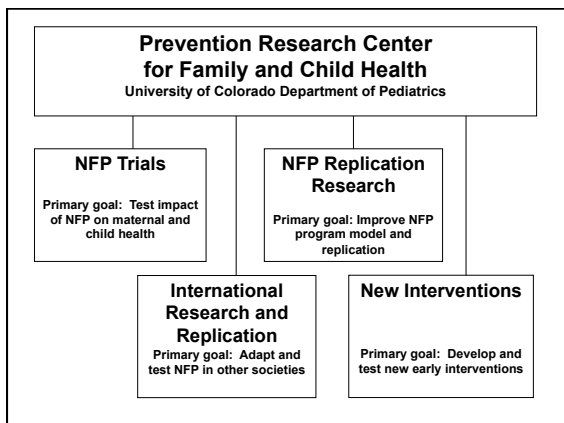
## FROM SCIENCE TO PRACTICE

- organizational process:
  - Participant characteristics
  - Key features of program delivery
  - Visitor characteristics
  - Visitor education in program
  - Program guidelines adapted to families' strengths and risks
  - Caseload size
  - Information system
  - Organizational characteristics
  - Community Advisory Boards



### Current Contexts

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## Overriding Questions

- foundation of program model while continuing to improve and scale it?
- Do augmentations improve performance or reduce costs (both financial and burden to nurses or families)?

## Research Focused on Improving Program Model and Implementation

- Participant retention and completed home visits
- Intimate partner violence
- Hormonal contraception
- New method to observe & promote caregiver-child interaction – DANCE and DANCE STEPS
- Maternal depression and anxiety
- Development of STAR (Strength and Risk) framework to guide program implementation
- Modernize NFP with telehealth and application of STAR, electronic facilitators, and retention intervention
- Improve NFP child welfare collaboration

