



Scaling the Nurse-Family Partnership

David Olds, PhD

**Professor of Pediatrics,
Psychiatry, Nursing, and
Public Health**

**University of Colorado
Health Sciences Center**

April 1, 2014

NURSE FAMILY PARTNERSHIP

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





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



N = 400

- Low-income whites
- Semi-rural

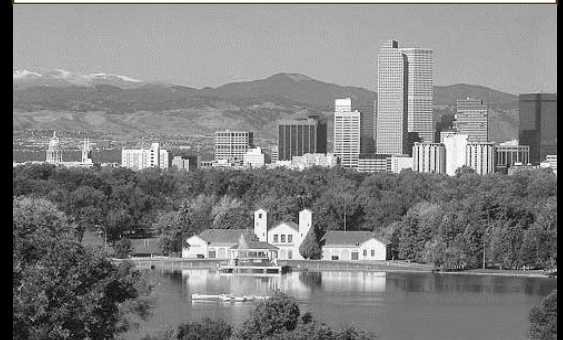
Memphis, TN 1987



N = 1,138 and N=743

- Low-income blacks
- Urban

Denver, CO 1994



N = 735

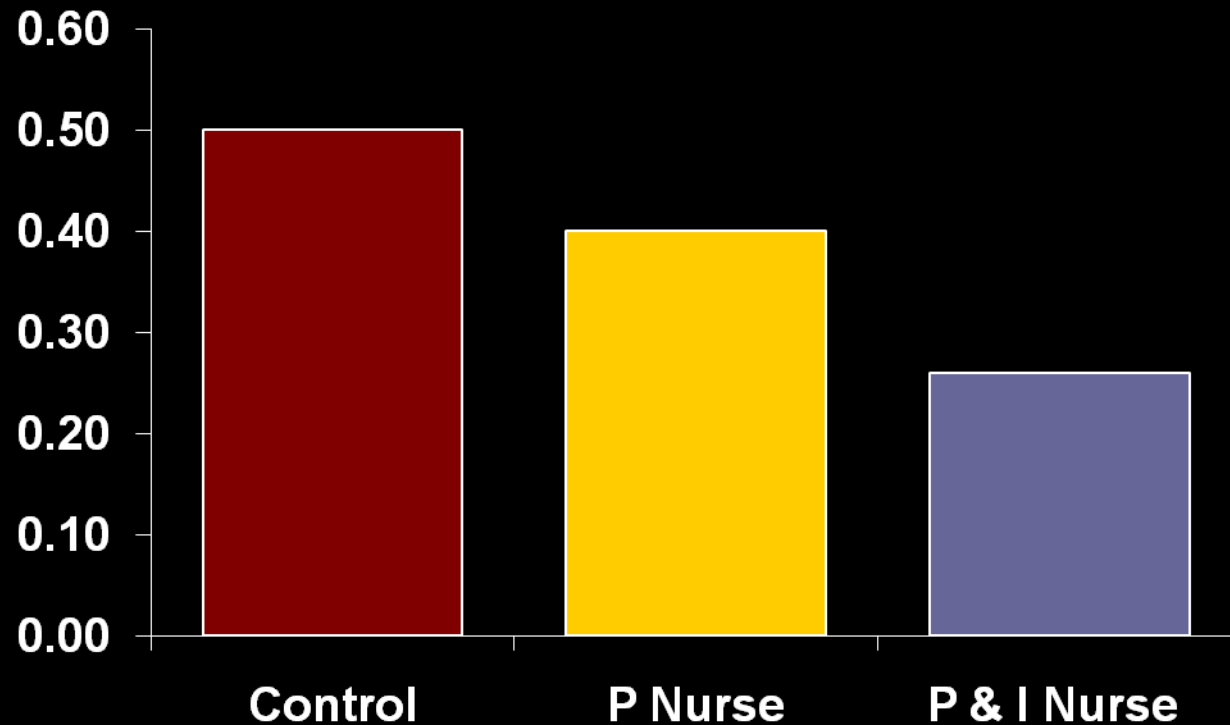
- Large portion of Latino families
- Nurse versus paraprofessional visitors

CONSISTENT RESULTS ACROSS TRIALS

- Improvements in prenatal health
- Reductions in children's injuries
- Improvements in children's language development and school readiness (those born to low resource mothers)
- Reductions in children's behavioral problems
- Reductions in children's depression
- Reductions in children's substance use
- Reductions in maternal behavioral impairment due to substance use
- Increased inter-birth intervals
- Increased maternal employment
- Reductions in welfare & food stamp use



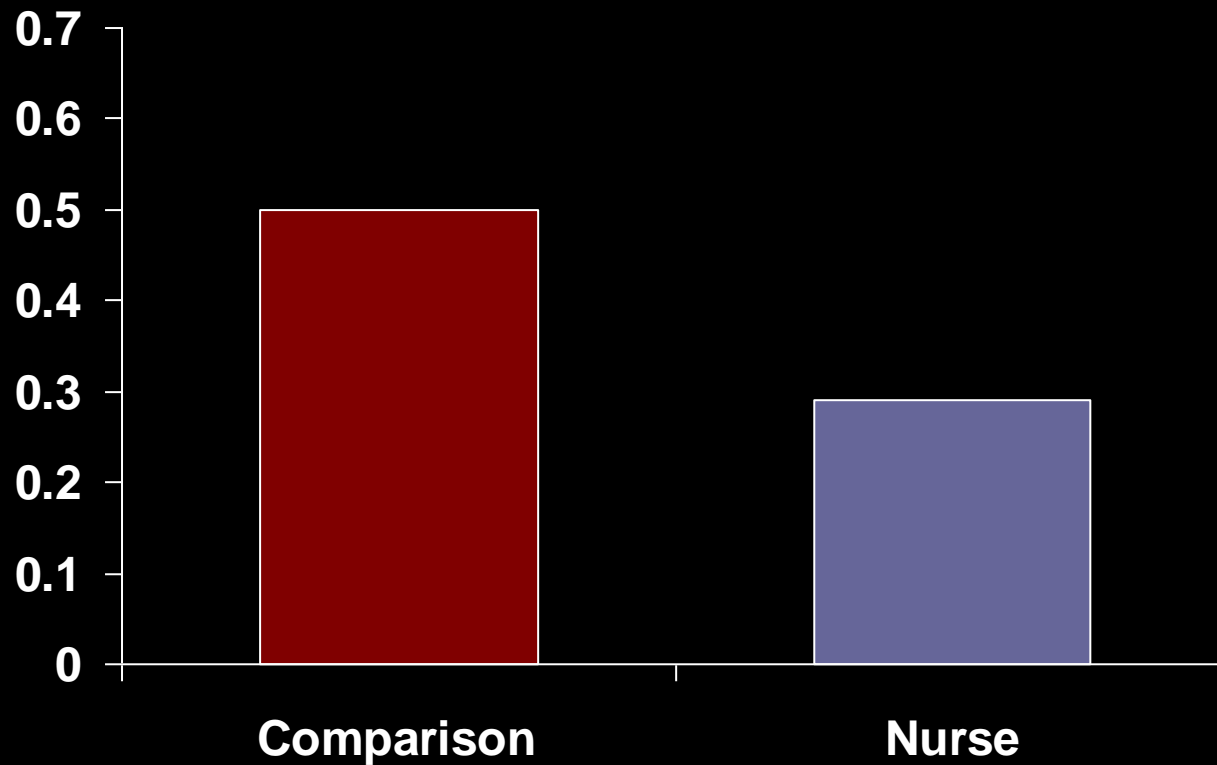
Indicated Cases of Child Abuse and Neglect 0 to 15 Years - Elmira



***P= .03**

JAMA, 1997;278:637-643

Number of Life-Time Arrests Elmira Youth - Age 19

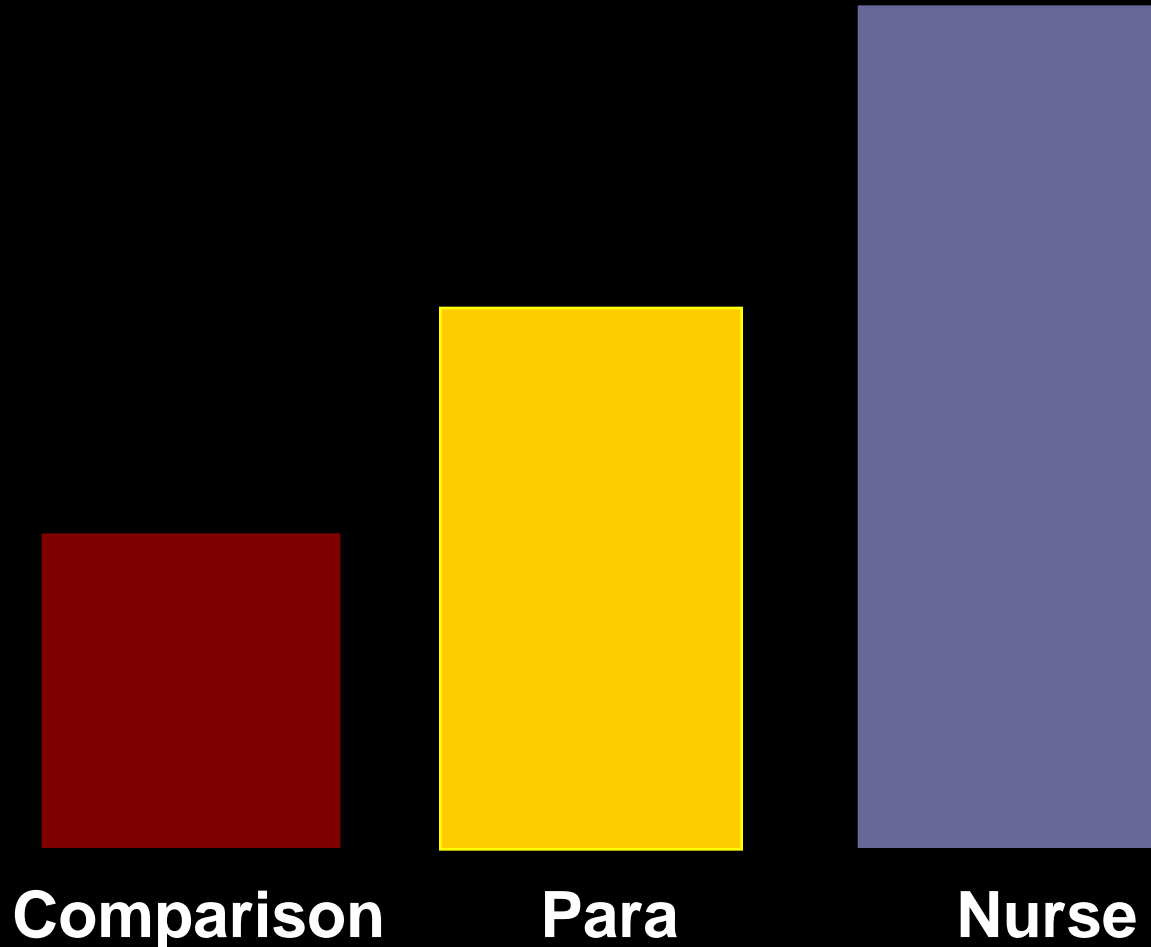


$P=.02$, $IR = 0.49$

Arch Pediatr Adolesc Med 164(1) 9-15

Pattern of Denver Program Effects

Maternal
and
Child
Functioning



Washington State Institute for Public Policy Economic Analysis

Nurse Family Partnership produced large return on investment:

– Implementation costs	\$9,600
– Benefits	\$22,781
– Return on investment	\$13,181

Coalition for Evidence-Based Policy

- Committed to reducing waste by identifying interventions that meet high evidentiary standards
- NFP only early childhood program that meets “Top Tier” status
- “Top Tier” interventions
 - Well designed and conducted randomized controlled trials
 - Replicated findings
 - Community settings
 - Sizable and sustained effects
 - Outcomes of clear public health, educational or social significance



National Growth



Transition



Initial Replication



Research



1977

1996

2003

2007

Today...

FROM SCIENCE TO PRACTICE

- **Nurturing Community, Organizational, and State Development**
- **Education and Consultation**
- **Program Guidelines**
- **Information System**
- **Assessing Program Performance**
- **Continuous Improvement**
- **These supports are crucial for successful implementation**



Sources of Funding

- **State and local dollars (TANF, Medicaid, Tobacco Settlement, General Funds)**
- **MIECHV – Affordable Care Act - 2009**
 - **\$8.6B in Administration's Budget Blueprint – 10 years**
 - **Designed to serve all Medicaid population after 10 years**
 - **Congress allocated \$1.5B over 5 years - runs out at end of 2014**
 - **Changed evidentiary standards to include more programs**
 - **Many additional reporting requirements**
 - **Additional trials (MIHOPE and Strong Start) - MDRC**
 - **Evidence is used by government to inform policy and practice, but links are tenuous**
 - **Current proposal - \$15B over 10 years – tobacco tax**
- **Social Impact Bonds – NYS and SC**



Nurse-Family Partnership is a growing, national program



43

States that NFP serves

529

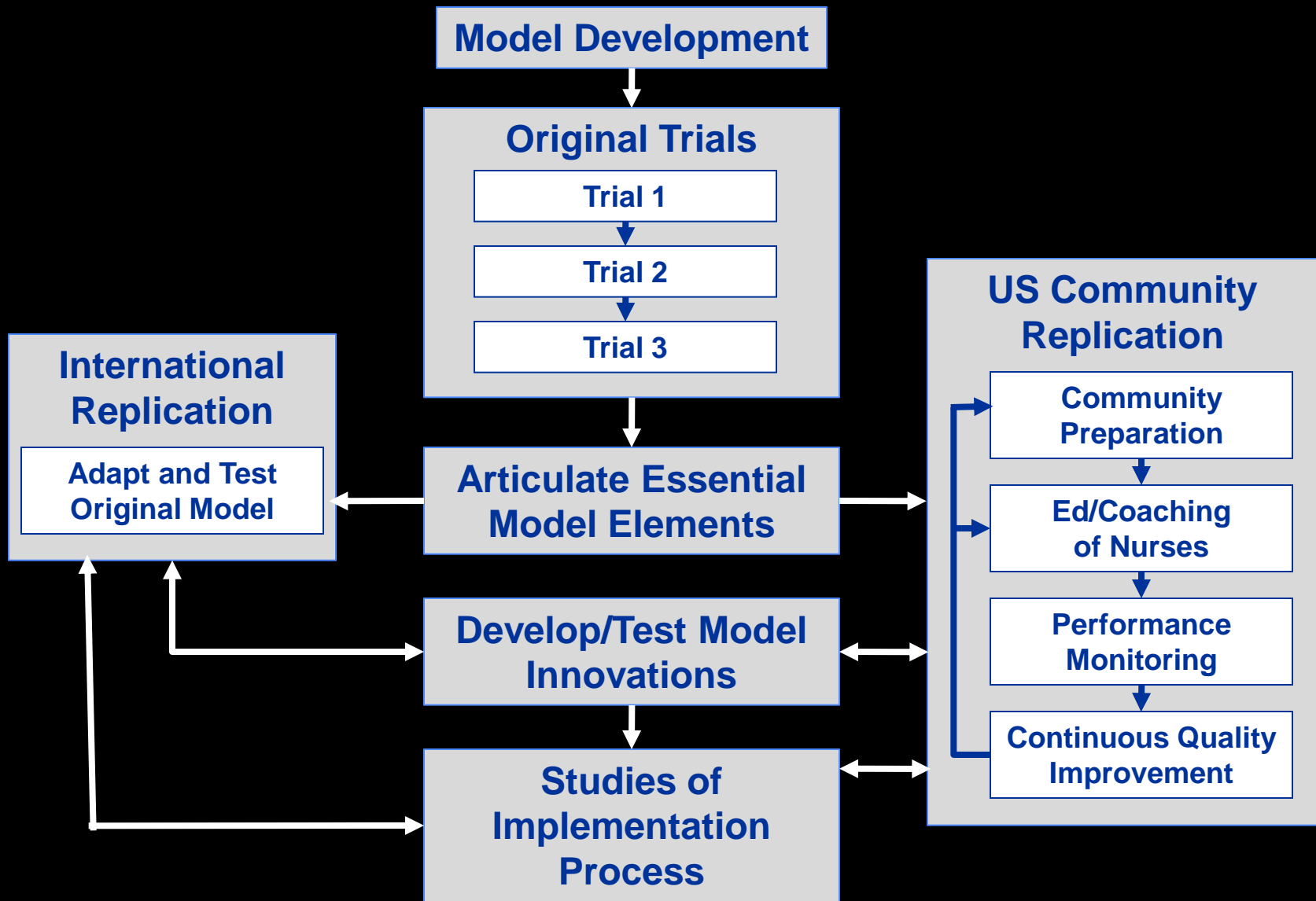
Number of counties NFP is serving

Tribal agencies are denoted by Band

Map does not include program in U.S. Virgin Islands

International Replication

- **No presumptions**
- **Adaptation**
- **Pre-test and small-scale trial**
- **Larger trial**
- **Faithful replication of adapted program**
- **International work:**
 - **UK – England, Scotland, Northern Ireland**
 - **Australia – aboriginal families**
 - **Netherlands**
 - **Canada – ON and BC**
 - **American Indians & Alaskan Natives**



Research Focused on Improving Program Model and Implementation

- **Participant retention and completed home visits**
- **Intimate partner violence**
- **New method to observe & promote caregiver-child interaction**
- **Maternal depression and anxiety**
- **Development of STAR (Strength and Risk) framework to guide program implementation**

