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New Studies: NFP Associated with Reduced Government Spending, Increased Academic Achievement, and Reduced Childhood Alcohol and Drug Use

Memphis Trial Findings Consistent with Earlier Studies of Nurse Home Visitation Program

DENVER, CO (May 3, 2010) — Two new, peer-reviewed studies find that 12 years after participating in the [Nurse-Family Partnership](#)® public health program (NFP), nurse-visited mothers cost the government less on food stamps, Medicaid and other assistance programs; reported longer relationships with partners; and had a greater sense of “maternal mastery.” The research also shows that the children of these nurse-visited mothers had higher academic test scores; reported less tobacco, drug or alcohol use; and had lower rates of anxiety and depression than control subjects. The papers are published in the May 2010 edition of *Archives of Pediatrics & Adolescent Medicine*, a *JAMA/Archives* journal.

In these longitudinal analyses, lead authors David Olds, Ph.D. (the NFP program founder) of the University of Colorado Denver and Harriet Kitzman, R.N., Ph.D. of the University of Rochester, joined by several colleagues, analyzed subjects from the second randomized, controlled trial of the Nurse-Family Partnership program, which took place in Memphis, Tenn. in the early 1990s.

“The program produced enduring effects on important aspects of maternal life course and government spending through age 12 years of the first-born child,” according to the reports’ authors. “In general, these findings support the effectiveness of the NFP. The partnership offers a means of reducing government spending and family poverty, improving children’s health and development, and grounding policy based on the results of replicated randomized controlled trials.”

The published paper “Enduring Effects of Prenatal and Infancy Home Visiting by Nurses on Maternal Life Course and Government Spending” involved 594 interviews and 613 record reviews for nurse-visited and control-group Memphis mothers when their firstborn child was 12 years old. Compared to control subjects, nurse-visited mothers stayed in relationships with their partners more than seven months longer on average, reported less alcohol-and drug-related impairment in carrying out maternal responsibilities, and felt a greater sense of mastery in managing their lives. Moreover, these women incurred \$1,025 less per

year on average in food stamp, Medicaid and other government assistance (in 2006 dollars). This confirms several past independent analyses showing that the NFP program provides a significant return on investment to communities.

In the other study, “Enduring Effects of Prenatal & Infancy Home Visiting by Nurses on Children,” the researchers interviewed and reviewed records of 191 firstborn 12-year-olds whose mothers participated in NFP, and compared them to 422 children whose mothers had been assigned at random to a control group during their mothers’ pregnancies. The number of nurse-visited children using cigarettes, alcohol or marijuana was several times less than control subjects, and nurse-visited children reported less anxiety or depression (22% vs. 31%). Nurse-visited children born to women with low psychological resources (an aggregate of mental health characteristics) also scored several points higher, on average, on multiple standardized math and reading tests.

The studies examined other markers among both mothers and children with varied results. For example, the researchers did not find statistically significant differences between nurse-visited children and control subjects 12 years later in terms of overall behavioral problems, and no significant effects were seen on mothers’ marital status, intimate partner violence, arrest rates and other markers. In some situations, raw numbers were too low to compare with statistical confidence.

“Continued research and analysis gives us ever greater confidence in findings that are replicated across time, contexts, and populations in separate randomized, controlled trials,” said Dr. David Olds, who directs the Prevention Research Center for Family and Child Health at the University of Colorado Denver. “These ongoing studies are core to our commitment to being accountable for the investment of public dollars in this prevention program, in hundreds of communities nationwide.”

These two studies provide “key, actionable evidence of how we can manipulate the early environment of children and make a tangible difference in their health,” said Dimitri Christakis, M.D., M.P.H., and Frederick Rivara, M.D., M.P.H., both of the University of Washington and Seattle Children’s Research Institute, in an accompanying editorial.

“This research needs to be translated into action,” added Christakis and Rivara. “In the new austerity that has been spawned by the national fiscal crisis, states are cutting back broadly on services. In many cases, children are being hit the hardest. Given the importance of early childhood experiences on the entire life

course, we can only hope that the people who make decisions about where monies are saved are mindful of the effect those decisions can have.”

Olds and his team plan to continue longitudinal studies on the effects of the Nurse-Family Partnership [nurse home visitation program](#) on families from the original three randomized, controlled trials that took place in Memphis, Denver, and Elmira, N.Y.

Citations: *Arch. Pediatr. Adolesc. Med.* 2010;164[5]:412-418 (Kitzman as lead author); 419-424 (Olds as lead author); 491-492 (Christakis & Rivara). Available for download at www.jamamedia.org.

About Nurse-Family Partnership

The Nurse-Family Partnership National Service Office (www.nursefamilypartnership.org) is committed to producing enduring improvements in the health and well being of low-income, first-time parents and their children by helping communities implement and sustain an [evidence-based public health program](#) of home visiting by registered nurses. Nurse-Family Partnership is the most rigorously tested [maternal and early childhood health program](#) of its kind. Randomized, controlled trials conducted over 30 years demonstrate multi-generational outcomes that benefit society economically and reduce long-term social service expenditures. Nurse-Family Partnership is headquartered in Denver, Colorado.

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