

## MATERNAL AND CHILD HEALTH OUTCOMES

**Nurse-Family Partnership® is an evidence-based community health program with 45 years of research showing significant improvements in the health and lives of first-time moms and their children affected by social and economic inequality.**

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**JACK P. SHONKOFF, M.D., DIRECTOR, CENTER ON THE DEVELOPING CHILD – HARVARD UNIVERSITY**



### Nurse-Family Partnership Improves Pregnancy and Birth Outcomes

Nurse-Family Partnership is increasing pre- and post-natal care with our nurse home visitation program which supports mothers in having healthier pregnancies and birth outcomes. Significant disparities exist in pregnancy and birth outcomes according to race, ethnicity, age, income and health insurance status.<sup>1</sup> Nurse-Family Partnership is closing that gap by partnering registered nurses with first-time moms and offering them support in bravely and boldly advocating for themselves and their children as they interact with the health care system.

Nursing is the most trusted profession for 20 years running, according to Gallup, positioning nurses to be highly effective in supporting family health through building strong relationships with caregivers.<sup>2</sup> Using their skills and expertise, NFP nurses assess both moms and babies to detect early warning signs of health problems during pregnancy, post-partum, infancy and early childhood that can lead to adverse outcomes. NFP nurses ensure that women and children experiencing signs of possible health complications are seen by the appropriate health care provider and that appropriate follow-up care is completed.



#### MATERNAL HEALTH OUTCOMES

- 35%** fewer cases of pregnancy-induced hypertension<sup>3</sup>
- 18%** fewer preterm births<sup>4</sup>
- 79%** reduction in preterm delivery among women who smoke cigarettes<sup>5</sup>
- 31%** reduction in very closely spaced (<6 months) subsequent pregnancies<sup>6</sup>

#### Maternal Health Improvements

Thanks to NFP's early intervention — pregnant women are encouraged to join the program as early in pregnancy as possible — moms have access to a trusted expert throughout their pregnancy who can advise them on everything they need to know about prenatal health. In turn, the NFP model has proven that when provided with quality, personalized health care, pregnant women will gain valuable knowledge, tools and resources, leading to positive health outcomes.



**CHILD HEALTH OUTCOMES**

- 48%** reduction in child abuse and neglect<sup>6</sup>
- 39%** fewer health care encounters for injuries or ingestions in the first 2 years of life among children born to mothers with low psychological resources<sup>7</sup>
- 67%** less behavioral and intellectual problems in children at age 6<sup>8</sup>
- 56%** fewer emergency room visits for accidents and poisonings through age 21<sup>9</sup>

**Child Health Improvements**

With the involvement of registered nurses, not only do birth outcomes improve but adverse infant and early childhood outcomes decrease. Often cited as the intervention for preventing child abuse and neglect, Nurse-Family Partnership's evidentiary standards are among the strongest available for preventive interventions offered for public investment.

**Ongoing Support**

NFP nurses are on the front lines of prevention efforts aimed at promoting healthier pregnancies and improving child health outcomes. Essentially, when first-time moms are paired with a personal nurse, the impacts are two-generational, and moms — especially those who are experiencing socio-economic inequality — will see long-term benefits for themselves and their children. Nurse-Family Partnership is actively exploring opportunities to expand as we seek to harness our role in improving pregnancy and birth outcomes.



THERE IS SOMETHING PROFOUNDLY HUMAN AND GOOD THAT CAN BE SUPPORTED THROUGH NURSE-FAMILY PARTNERSHIP AT THIS STAGE IN HUMAN DEVELOPMENT. IT PROVIDES REALISTIC HOPE FOR THE FUTURE. WE'VE DEVELOPED A NETWORK OF NURSES, FAMILIES AND POLICYMAKERS WHO HAVE A COMMITMENT TO MAKING THE WORLD A BETTER PLACE.

**DAVID OLDS, PHD, FOUNDER OF NURSE-FAMILY PARTNERSHIP AND PROFESSOR OF PEDIATRICS AT UNIVERSITY OF COLORADO**



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1. Troiano N, Witcher P. Maternal Mortality and Morbidity in the United States. The Journal of Perinatal & Neonatal Nursing. 2018  
 2. National Nurses United. Press Release: Once Again Nurses Top Gallup Poll as Most Trusted Profession 17 Years Running. Dec. 20, 2018 (updated link?)  
 3. Kitzman H, et al. Effect of prenatal and infancy home visitation by nurses on pregnancy outcomes, childhood injuries, and repeated childbearing. A randomized controlled trial. JAMA. 1997  
 4. Thorland, W., & Currie, D. Status of Birth Outcomes in Clients of the Nurse-Family Partnership - Supplemental Materials. Maternal and Child Health Journal. 2007  
 5. Olds DL, Henderson CRJ, et al. Improving the delivery of prenatal care and outcomes of pregnancy: a randomized trial of nurse home visitation. Pediatrics. 1986  
 6. Kitzman H, Olds DL, et al. Enduring effects of nurse home visitation on maternal life course: a 3-year follow-up of a randomized trial. JAMA. 2000  
 7. Reanalysis Olds et al. Long-term effects of home visitation on maternal life course and child abuse and neglect fifteen-year follow-up of a randomized trial. JAMA. 1997  
 8. Reanalysis Kitzman H, et al. Effect of prenatal and infancy home visitation by nurses on pregnancy outcomes, childhood injuries, and repeated childbearing. JAMA. 1997  
 9. Olds DL, Kitzman H, et al. Effects of nurse home visiting on maternal life-course and child development: age-six follow-up of a randomized trial. Pediatrics 2004  
 10. Olds DL, Henderson CRJ, et al. Preventing child abuse and neglect: a randomized trial of nurse home visitation. Pediatrics. 1986