The moms have so many questions. What will happen if my baby doesn’t get her immunizations on time? What should I do about this rash? Where will we go if we get evicted from our apartment? How can we buy food now that I’ve lost my job?

And the one they fear the most, I have a fever, chills, headache, sore throat – what should I do?

Nurse-Family Partnership® (NFP) nurses are on the front lines in the COVID-19 pandemic nationwide and, as they shelter-in place, home-school their own children, and monitor themselves and family members for signs of illness, they’re working even harder to keep vulnerable moms from slipping through the cracks in a suddenly shattered reality.

Nurse Kim at Starfish Family Services in Detroit admits to having had some sleepless nights.

“I have been thinking about my clients and some of the calls I need to make to the clients I’ve been most concerned about,” said Kim, who has been with Nurse-Family Partnership since 2012.

Her clients, all first-time, low-income moms, have challenging lives in the best of times. As stay-at-home orders have upended their lives, the stresses on them have exploded.

Some moms spend hours on hold trying to apply for unemployment benefits.

“You have 28 days from the time you lose your job to apply for benefits and some of my clients fear they’ll run out of time,” Kim said. “They wait on the phone for two hours and then an automatic prompter hangs up on them. They can’t get through.”

Some landlords are sending notices demanding rent despite the fact that government agencies have ordered a stop to evictions. “And,” Kim said, “my clients are calling asking about their rights.”

Moms with postpartum depression are unable to attend counseling sessions, so Kim is making extra phone calls to check on them and working to help them access services via telehealth.

“Some moms don’t have a phone,” Kim said, so the NFP National Service Office and Verizon are working to provide them with free iPhones, data plans and minutes. The first distribution of phones began in April.

For some, she said, “We communicate, sending emails back and forth, but it’s very time-consuming.”

Other moms have no internet service.

“I’ve found that each mom has different needs, different technologies, different spaces,” she said. “No matter what the moms need, we’re meeting them where they are.”
Many of Kim’s clients have no transportation and depend on small corner grocery stores. As the virus has swept through Detroit, many small groceries have closed, severely limiting access to food. Worried moms look to Kim for help.

She has referred them to Starfish Family Services, which also is the network partner for Nurse-Family Partnership in Detroit. It has ramped up services to deliver food to a rapidly increasing number of desperate families.

Kim said that none of her moms have tested positive yet, but even before shelter-in-place was the rule of the day, she was being very cautious. She recalled how in one of her last in-person visits, she went over to a client’s home to assess her health after hearing she had been experiencing symptoms of preeclampsia – a potentially life-threatening pregnancy condition.

“I screened her household for signs and symptoms of COVID-19, made a home visit and donned a mask and gloves to assess a critical blood pressure reading,” she said.

Kim sanitized everything before and after her visit, but, she said, there’s no way to be sure everyone is safe without social distancing.

“I’ve always taken the side of caution more than the average person. I was wiping down my groceries in the first week.

“When you know they trust you, it puts a lot of pressure on you,” she said.

As stay-at-home orders are extended, Kim worries about the psychological impact such extreme isolation can have on her clients.

“For some, social media is a good outlet. For others, video chats on their phones are good. Socialization is important, especially when they can talk to other moms.”

Kim has tried to take her own advice to heart as well. She has reached out to friends for support via social media. She takes deep breaths. She prays and meditates at the start of each day.

The whole NFP team has been “incredibly supportive,” Kim said. Nurses have been calling each other, texting and video-chatting frequently, sharing resources and checking to make sure their colleagues and their families are doing OK.

Some are sending inspirational texts to the staff. Others provide phone and video support around the clock, Kim said.

“It’s built our morale and planted a sense of hope among us. Really, it’s some of the same things we are trying to model for our NFP families.”

Now, even though they can’t make in-person visits, she and her colleagues use phone calls and video chats to continue to help NFP families cope with sometimes overwhelming personal challenges – connecting them with service agencies, advising them on medical and psychological problems as they develop, and listening, always listening.

“There’s so much to do,” she said, “and it means so much to our NFP families.”