



Media Contact:

Olivia Biggs

(740) 304-4413

Olivia.Biggs@nursefamilypartnership.org

RESEARCH FOLLOW-UP HIGHLIGHTS NURSE-FAMILY PARTNERSHIP'S SUBSTANTIAL IMPACT ON LOWERING HYPERTENSION RATES IN MOTHERS AND REDUCING OBESITY AMONG THEIR DAUGHTERS

NFP Home Visiting Study Reveals Promising Impact on Women and Children Facing Social and Economic Inequality

DENVER, COLO. (Jan. 25, 2024) — JAMA Network Open, a medical journal published by the American Medical Association, last week published an 18-year follow-up of participants in a randomized clinical trial of [Nurse-Family Partnership](#)® (NFP). This study titled, “[Early Home Visits and Health Outcomes in Low-Income Mothers and Offspring](#)” found that nurse home visits to mothers facing social and economic challenges can significantly reduce hypertension in mothers of females and obesity in their daughters.

Specifically, researchers found through the follow-up study that nurse visits during pregnancy and the first two years of a child’s life through Nurse-Family Partnership decreased the likelihood of daughters being obese at ages 12 and 18 by 55% and severely obese by 81%. Mothers of girls also exhibited a 39-78% decrease in rates of hypertension (stages 1 and 2, respectively). NFP is a national, early intervention program offered through the National Service Office for Nurse-Family Partnership and Child First that serves first-time mothers and their children affected by social and economic inequality.

As stated in the study, these findings suggest that prenatal and infancy home visitation by NFP nurses holds promise for reducing obesity in female offspring and lowering their mothers' hypertension among those affected by social and economic inequality.

“The women in this study were facing profound adversities. The trial found that a relatively small investment through NFP nurse home visits early in life can lead to important changes decades later among those experiencing substantial needs,” said **David Olds, PhD**, professor of pediatrics at the University of Colorado Anschutz Medical Campus, who is senior author of the study and founder of NFP.

This study represents one of the longest follow-ups of Nurse-Family Partnership, further collecting data from an NFP trial initiated over 35 years ago in Memphis, Tennessee. The original randomized clinical trial, beginning in 1987, followed 742 mothers affected by social and economic inequality. Researchers revisited the families at ages 12 and 18 to assess their health and collect a wide range of health data.

This work is unique in terms of the study participation rates. Of the original 742 mothers, randomized interviews were completed after 18 years with 618 mothers and 629 of their first-born children.

The public health implications of this study are considerable. Poverty and adverse childhood experiences (ACEs) pose substantial risks for a range of health problems, particularly among females and Black individuals. Obesity and hypertension increase the risk of chronic health conditions such as heart disease, diabetes and kidney failure, leading to premature death.

These findings suggest that risks for chronic disease among mothers and their female children affected by social and economic inequality may be prevented with home visitations by nurses. Additionally, considering the large costs of obesity and

hypertension, these results suggest that NFP can make cost-saving contributions to the physical health of individuals coping with adversity.

The study found that, in contrast among male offspring, there were no significant effects on obesity or severe obesity. However, in most instances, the prevalence of either level of obesity in these males was generally low. Additionally, the researchers attribute the difference in obesity rates between the sexes to the much higher prevalence of obesity in females from disadvantaged backgrounds.

A broader examination of the effects of home visiting on the health-related risks is also underway this year in an ENRICH (Early Intervention to Promote Cardiovascular Health of Mothers and Children) study. The ENRICH project, funded by HRSA and The National Heart, Lung, and Blood Institute, aims to enhance home visiting programs, including NFP, to address obesity and cardiovascular disease risk in underserved populations. Through a randomized clinical trial, multiple home visiting programs will implement common educational modules, testing if these enhancements improve outcomes related to health behaviors and metrics linked to cardiovascular disease risk in mothers and children.

This current study adds to over 45 years of research that shows that Nurse-Family Partnership is successful in improving mother's health and economic self-sufficiency, and improving outcomes for her first child – including birth and child health outcomes, preventing child abuse, increasing school readiness and reducing juvenile crime, among others.

###

About the National Service Office for Nurse-Family Partnership and Child

First

The National Service Office (NSO) is the central, unified operational structure for two evidence-based programs: [Nurse-Family Partnership](#) and [Child First](#). In 2020, what was formerly the NSO solely for Nurse-Family Partnership joined forces with Child First, a merger empowering two proven, evidence-based models to share complementary expertise, infrastructure and integrated support services. The resulting unified entity works to ensure that health care, early childhood development and the mental health of the entire family are delivered in proven ways to achieve long-term positive outcomes.