

Case 50

The Nurse-Family Partnership

Robert Wood Johnson Foundation, 1978

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Background. Children born to low-income, first-time mothers are at increased risk for a number of problems, including low birth weight, abuse, neglect, and juvenile crime.⁷⁶⁵ With this in mind, the Nurse Home Visitation program was conceived by Dr. David Olds, who, in 1978, approached the Robert Wood Johnson Foundation for help in funding a study to determine whether the risks associated with low-income, first-time pregnancies could be mitigated by partnering nurses with at-risk pregnant women. Although Olds was, at the time, “an unknown assistant professor,” program officers at the RWJF were “impressed with both the scientific design of the experiment and the fact that the program had sound theoretical underpinnings.”⁷⁶⁶ The Foundation gave Dr. Olds an initial grant to set up a demonstration project in Elmira, New York.

Strategy. For over twenty-five years, the Robert Wood Johnson Foundation has provided ongoing support to the Nurse Home Visitation program (later renamed the Nurse-Family Partnership). The Foundation has supported research—especially controlled, randomized trials—in order to measure specifically the effectiveness of nurse home visitation. RWJF has also funded the program’s replication at sites across the United States.

The Nurse-Family Partnership curriculum is, for the most part, uniform from one site to another.⁷⁶⁷ Trained nurses—each with a caseload of no more than twenty-five women—pay weekly or biweekly visits to at-risk expectant mothers.⁷⁶⁸ These visits continue for two years after the mother gives birth. Nurses are trained to help new mothers develop parenting skills and to monitor the health of the child.

The Elmira program was followed, in 1990, by a pilot program in Memphis. Because it was situated in a larger, more urban environment, in which external conditions were less subject to control, the Memphis study was intended to simulate more accurately the results—positive and negative—that could be expected in any large-scale implementation of the program.

In 1999, the RWJF contributed \$10 million over three years to help spread the nurse home visitation curriculum. This grant helped establish the Prevention Research Center for Family and Child Policy (PRC) at the University of Colorado. Headed by Dr. Olds, the Center helped found the National Center for Children, Families, and Communities, which works to make available the tested and proven model of nurse home visitation to communities around the country. Continuing to refine the program’s methods, the PRC also launched, in 1994, a third test site, in Denver.

Outcomes. Nurse-Family Partnership programs are now active in over 150 communities nationwide.⁷⁶⁹ The most striking results were shown in a follow-up study of the Elmira project, fifteen years after the mothers had graduated from the program. The study showed:

- A 79 percent reduction in child abuse and neglect from birth to the first child’s fifteenth birthday
- A 30-month reduction in welfare dependency by the first child’s fifteenth birthday
- A 44 percent reduction in behavioral problems among mothers due to alcohol and/or drug abuse
- A 69 percent reduction in arrests among the mothers over fifteen years following birth of

their first child

- A 51 percent reduction in alcohol consumption among adolescents by their fifteenth birthday
- A 54 percent reduction in arrests among adolescents by their fifteenth birthday
- A 56 percent reduction in emergency room visits for injuries and ingestions by child's second birthday⁷⁷⁰

In addition, mothers who participated in the program were significantly less likely to smoke cigarettes while pregnant, thus mitigating the health costs of prenatal smoking.⁷⁷¹ They also had fewer repeat pregnancies.⁷⁷²

The beneficial effects of the Memphis and Denver projects have, so far, been smaller than those in Elmira were at the same stage. However, all three studies have shown statistically significant results “on [the program’s] targeted outcome domains (women’s prenatal health, infant health and development, maternal life-course)...”⁷⁷³

Government officials have begun to take notice of its success. Hawaii, Oklahoma, and Colorado have each implemented statewide nurse home visitation programs, assisted by Dr. Olds and the RWJF. And in March 2004, a bipartisan group of U.S. Senators co-hosted, along with the RWJF, the first Nurse-Family Partnership National Forum, in Washington, D.C.

Impact. The home visitation model employed by the Nurse-Family Partnership costs about \$2,800-\$3,200 per family per year.⁷⁷⁴ A RAND Corporation study estimates that for every dollar spent, the program yields four dollars of social benefit.⁷⁷⁵ So Colorado, for example, which projects its 2008 budget for nurse home visitation at \$17 million, could potentially achieve social benefits worth \$68 million from that year’s investment in the program.

The Nurse-Family Partnership’s strong commitment to demonstrating impact has helped it attract additional support. The Partnership has received grants from many sources, including the Packard, Ford, and Grant Foundations, the Commonwealth Fund, the Edna McConnell Clark Foundation, the Carnegie Corporation of New York and the U.S. Departments of Justice and Health and Human Services. In particular, the Robert Wood Johnson Foundation’s substantial investment was the seed money that enabled Dr. Olds to develop and refine his methods, and to measure and prove their effectiveness. There are a number of other, less effective home visitation programs aimed at high-risk mothers and children. The Nurse-Family Partnership is unique in its ability to achieve significant impact among geographically and ethnically diverse groups. Its results have been impressive, but even they are eclipsed by the enormous good it may yet achieve as it continues going to scale in the coming years.

Notes

765. Joseph Alper, “The Nurse Home Visitation Program,” *The Robert Wood Johnson Foundation Anthology, Vol. V*, Stephen L. Isaacs and James R. Knickman, eds. (San Francisco: Jossey-Bass, 2002).

766. Ibid.

767. RWJF-sponsored studies have shown that home visitation by nurses works better than by other professionals and that deviating from the program’s curriculum tends to decrease its effectiveness. Ibid.

768. Mothers are eligible for the program if they meet two or more of the following criteria: unmarried, unemployed, or no high school diploma. Ibid.

769. http://www.nccfc.org/research_publications.cfm.

770. RWJF News Release. “Families, Nurses, Members of Congress Salute Model Program’s Success in Preventing Abuse, Promoting Health.”

771. Alper, "The Nurse Home Visitation Program."

772. Ibid.

773. http://www.nccfc.org/research_publications.cfm.

774. David Olds, Peggy Hill, and Elissa Rumsy, "Prenatal and Early Childhood Nurse Home Visitation," *Juvenile Justice Bulletin*. U.S. Department of Justice. November 1998.

775. Ibid. According to the Robert Wood Johnson Foundation, the cost to society each time a juvenile "leaves high school for a life of crime and drug use" is between \$1.7 million and \$2.3 million.