

NURSES AND FAMILIES

TRANSFORMATIONAL RELATIONSHIP CREATING CHANGE

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 mothers and their children affected by social and economic inequality.

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MANY WOMEN DON'T HAVE SUPPORT. YES, I WAS YOUNG WHEN I GOT PREGNANT AND I FELT LIKE PEOPLE WERE QUICK TO JUDGE ME. NURSE STEPHANIE BEING THERE FOR ME, MADE ME FEEL LIKE I COULD DO IT.

— MAHOGANY, NFP MOM



NFP MOTHERS

20

median age

78%

unmarried

60%

completed high school education

\$6,000

over 1/3 of moms have income less than

*Cumulative data from 1996 - 2020

RACE

- 45% white
- 29% Black or African American
- 9% declined
- 5% multi-racial
- 2% Asian or Pacific Islander
- 2% American Indian or Alaska Native

ETHNICITY

- 63% non-Hispanic
- 31% Hispanic
- 2% declined

*Cumulative data from 2010 - 2020

WHY A NURSE INTERVENTION?

The expertise and experience that registered nurses bring to this program is key in gaining the trust and confidence of a new mother. An NFP nurse helps guide families through the emotional, social and physical challenges and systemic barriers in healthcare they face as they prepare for a healthy birth. Prenatal support is the starting point, and the NFP nurse continues to work with the family after the baby is born. NFP nurses partner with families and communities to prevent illness and injury, promote health and protection capacity through the sharing of knowledge and skills that lead to positive outcomes.

NURSE-FAMILY PARTNERSHIP MOTHERS

Nurse-Family Partnership partners with first-time mothers who face major socioeconomic barriers to accessing resources and supports needed to achieve the greatest health and wellness outcomes. Individuals voluntarily enroll as early as possible with nurse visits, ideally before the 16th week of pregnancy.

Nurse visits have proven extremely helpful during the transition to motherhood which can be particularly challenging when mothers are socially isolated or are experiencing severe adversity.

A RELATIONSHIP YOU CAN COUNT ON

Nurse-Family Partnership assists with breaking the cycle of poverty — confident mothers become knowledgeable parents who are able to prepare their children for successful futures. Nurses and mothers make a two-and-one-half year commitment to each other, around 60 planned visits, adjusting the number of visits based on the mother's needs. This intensive level of support has been proven to improve outcomes relating to:

*all data is client self-identified



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Preventive health and prenatal practices for mother

— helping find prenatal care from health care providers, improving her diet and, if relevant, reducing her use of cigarettes, alcohol, opioids and habit-forming substances. Preparing for the arrival of the baby by educating on the birth process and the immediate challenges of the first few weeks after delivery (e.g., breastfeeding and potential postpartum depression).

Health and development knowledge and care for families

— the NFP Model utilizes comprehensive nursing assessments that include screening tools to provide individualized coaching aimed at empowering families; building on their strengths and innate parenting skills to support their child in achieving development milestones and behaviors.

Life coaching for mother and family — nurses and mothers partner together with mutual respect, prioritizing goals and identifying areas of support to create the lives they desire. Coaching families may include support on advocating for themselves within healthcare systems, planning for continued education, and finding and maintaining employment. The partnership may include family members, partners, and friends.

THE NURSE AND MOTHER RELATIONSHIP

Client-Centered means the nurse is constantly adapting to ensure the visit and materials are relevant and valued by the mother. Supporting growth and individual needs is the focus.

Relational means that the relationship between the nurse and the mother is the primary tool used for learning and growth in each family served.

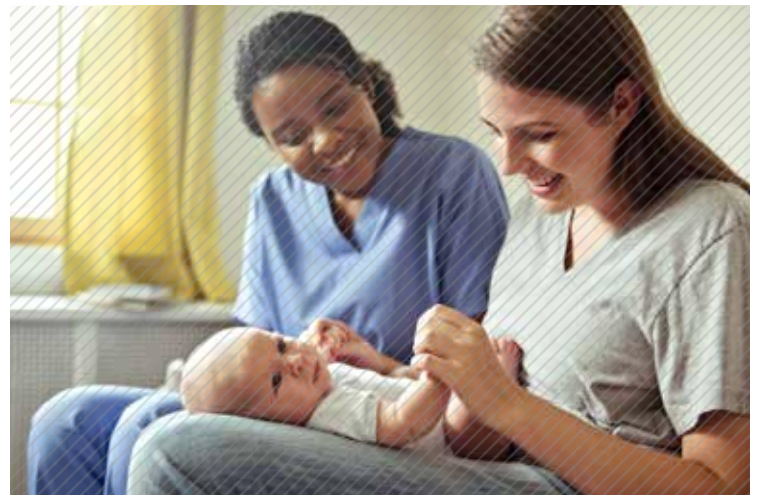
Strengths-Based means that the intervention is based on

solid adult learning and behavior change theory. Adults and adolescents make changes most successfully when they are building on their own knowledge, strengths and successes.

Multi-Dimensional means that the life of each program participant is viewed holistically and what the program offers is connected to multiple aspects of personal and family functioning: personal and environmental health, parenting, life course development, relationships with family and friends and community connections.

FIDELITY TO THE MODEL

Nurses document and enter assessments from each visit into a web-based data collection system. The data is monitored to ensure that the program is being implemented with fidelity to the model as tested in the original randomized, controlled trials, so that comparable results are achieved. The Nurse-Family Partnership Model Elements are supported by evidence of effectiveness based on research, expert opinion and field lessons and/or theoretical rationales.



1900 Grant Street, 4th Floor
Denver, Colorado 80203
NurseFamilyPartnership.org
866.864.5226

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AS A NURSE, I GET TO BE THE BEST FAMILY ADVOCATE I CAN BE BY SUPPORTING FOLKS NAVIGATING THE HEALTH CARE SYSTEM AND PROMOTING THEIR RIGHT TO SEEK CARE THEY DESERVE WITH RESPECT, DIGNITY, COMPASSION AND EVIDENCE-BASED INFORMATION THAT MEETS THEIR NEEDS AND CONSIDERS THEIR VALUES FREE OF JUDGEMENT.