

## 2013 Program Report Card: Nurturing Families Network (Department of Social Services)

*Quality of Life Result:* All Connecticut children birth to age 9 grow up in a stable environment, safe, healthy, and ready to succeed.

*Contribution to Result:* The NFN provides intensive home visiting for high risk families to help solve problems, break the family's social isolation, prevent child abuse and neglect and ensure that children have a promising future.

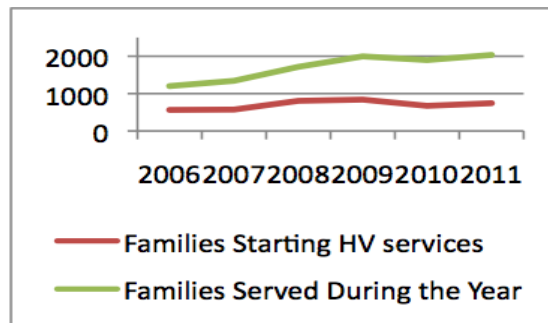
Program Expenditures	State Funding	Federal Funding	Other Funding	Total Funding
Actual FY 12	10,383,000	600,000		10,983,000
Estimated FY 13	10,189,346	2,237,172		12,426,518

*Partners:* Nurturing Families Network infrastructure includes 40 sites operating within all 29 birthing hospitals and partners with dozens of public and private service centers.

### How Much Did We Do?

Increase in number of families served each year and comparative number of families enrolling in home visiting services per year.

Figure 1. NFN Participation Rates (2007 – 2011)



**Story behind the baseline:** Along with an increase in the number of NFN sites, the number of families enrolling in home visiting services has increased from 563 in 2006 to 743 families in 2011. Additionally, the number of families served in home visiting has risen more than 69% from 2006 to 2011, with 1,201 participants in 2006 to 2,034 participants in 2011. There was a slight decrease in rates of participation in 2010 compared to 2009, which is likely related to the state budget uncertainty impacting sites, with an accompanying loss of staff (3 times more new staff were trained in 2010 compared to 2008) and consequently fewer participants.

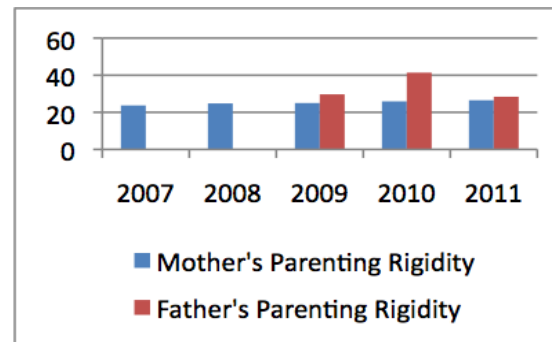
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Submitted Jan. 2013

### How Well Did We Do It?

The program was successful in screening high-risk parents with rigid parenting attitudes.

Figure 2. Parenting Rigidity: Mothers and Fathers (2007 – 2011)



**Story behind the baseline:** Scores on the Child Abuse Potential Rigidity (CAPI-R) subscale indicate the level of rigid parenting attitudes, and consequently risk for maltreating children. The average score for a normative population on the CAPI-R is 10.1 with a standard deviation of 12.5. The data in Figure 4 shows that NFN mothers (average score of 27) and fathers (average score of 32) come into the program with CAPI-R scores more than twice the normative score (i.e. 10), indicating extremely high-risk populations. CAPI-R outcomes are shown in figure 8 pm page 3.

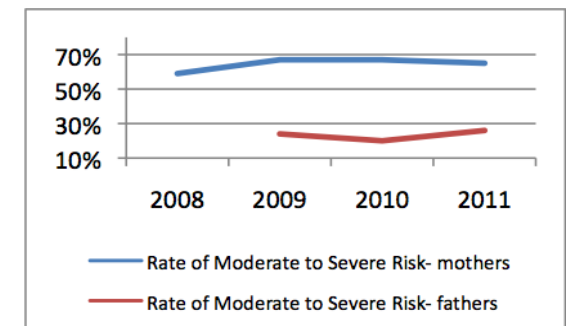
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Trend Going in Right Direction? ▲ Yes; ▼ No; ◀▶ Flat/ No Trend

### How Well Did We Do It?

The program was successful in engaging parents with moderate to severe family stress.

Figure 3. Rate of Moderate to Severe Family Stress (2008 - 2011)



**Story behind the baseline:** Rates of moderate to severe family stress, as measured by the Kempe Family Stress checklist, are presented in Figure 5. These data show that over 60% of mothers score between the moderate to severe range in areas of multiple sources of stress including childhood history of abuse and neglect, social isolation, depression, and history of crime and substance abuse. While fathers report lower rates of moderate to severe stress overall compared with mothers, their stressor's are higher among areas of financial stability and living situations, and are comparable to rates of mother's own history of abuse and neglect.

Trend: ◀▶

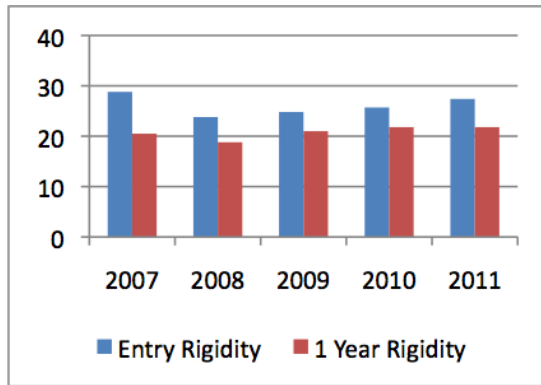
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### Is Anyone Better Off?

Mothers participating in NFN show less rigid parenting attitudes over the first year of program services.

Figure 4. **Parenting Rigidity Outcomes After 1 Year of NFN Program Participation**



**Story behind the baseline:** Families participating in NFN home visiting show significant reductions on the rigidity subscale of the CAPI-R within 1 year of program participation. These data indicate that families have less rigid parenting attitudes and are less likely to treat their children forcefully.

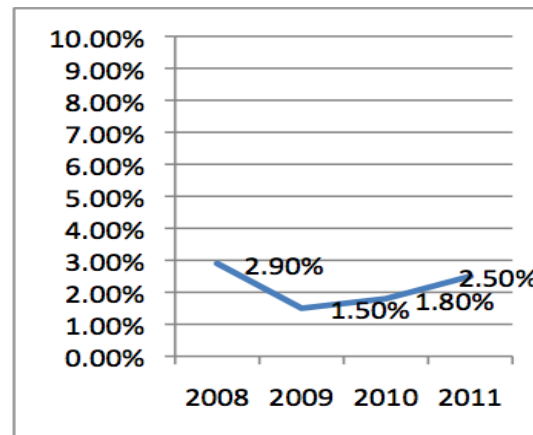
Reported NFN annualized rates of maltreatment for 2005 through 2009 show that rates of substantiated abuse and neglect ranged from 4.4% (the highest) in 2007 to 1.3% (the lowest) in 2008, with 2009 rate of 2%. These rates are very low when compared with rates of 20-25% reported in studies with similarly high-risk groups that did not receive home visitation services in the state of Connecticut.

Trend: ▲

### Is Anyone Better Off?

A smaller percentage of NFN children are identified as having a potential developmental delay compared to a normative population.

Figure 5. **Percentage of NFN Children Identified As Having a Potential Delay on the Ages and Stages Questionnaire**



**Story behind the baseline:** Home visitors screen all children in the NFN program for developmental delays and social and emotional problems. In 2012 they completed 3,804 screens using the Ages and Stages Developmental Monitoring Measure. Each year only a small percentage of the children show a “red flag” for a developmental delay. The rates for the past 4 years have ranged from 1.5% to 2.9%. This compares favorably to the approximately 13% of young children nationwide who have a diagnosed developmental delay.

Trend: ▲

### Proposed Actions to Turn the Curve:

There have been new initiatives to serve special populations of parents. In-Home Cognitive Behavioral Therapy is offered to mothers with depression in NFN sites statewide. In addition, there are now fathering home visitors in 10 NFN sites and 11 more are being added with new federal funds. (Note: Results of a study on IHCBT will be released later in 2013. Also, the sample size of father participants for 2011 is still too small to analyze outcome data.) There is also a process study underway to better understand the services being provided to fathers. Finally, a study focusing on child outcomes is starting in February 2013. The information from these projects will help inform and improve the implementation of NFN program services and maximize outcomes for mothers, fathers and children.

### Date Development Agenda:

We have developed a web-based data system, the Children’s Trust Fund Data System (CTFDS), to track families and measure outcomes for families participating in Nurturing Families Network. The NFN site staff is transitioning from a paper-based system to the web-based system.

The web-based data system will save staff time now spent on the paper system and allow for the ‘real time’ monitoring of NFN program implementation.

Access to the most current information will enhance quality assurance and program improvement efforts.