

# Infancy Home Visiting Programs

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## Purpose

To review the results of evidence-based trials on the impact of home visiting programs (HVP) on family dynamics for families with newborn babies at increased risk for adverse family functioning and compare the outcomes to routine care provided through office visits with health care professionals.

## Background and Significance

- The impact of adverse childhood events (ACEs) continue to have an impact through adulthood.<sup>2</sup>
- Risk factors: low socioeconomic status, young parents, low parent education level, poverty, high crime rates, unemployment, child neglect, and family history of abuse.<sup>5</sup>
- Potential effects: impaired learning, academic achievement, socioeconomic status later in life, relationship impairment, and an altered stress response.<sup>2</sup>
- Early intervention is key to strengthen protective factors that mitigate the impact of ACEs.<sup>5</sup>
- HVPs can mitigate the impact that adverse events have on family dynamics and child development.

## Methods

**PICOT:** (P) In at risk mothers, (I) does providing home visiting programs during pregnancy and postpartum (C) as compared to doctors' office visits (O) improve family dynamics?

**Databases:** CINAHL and OneSearch

**Key Words:** "Pregnancy", "home visit", "home visiting", "newborn".

**Results:** Of the 1,975 articles yielding from database searches, 5 articles were chosen for having the desired outcome and including the population desired.

## Evidence Summary

Author, Year	Results	Level of Evidence	Evidence Quality
Goodman et al., 2021	Intervention group (IG) associated with a 39% decrease in mean investigations for child (95% CI, -0.80 to 0.06; 90% CI, -0.73 to -0.01) and 33% decrease in mean total child emergency medical care use (95% CI, -0.59 to -0.14; 90% CI, -0.55 to -0.18).	Level I	A
Riggs et al., 2022	IG participation significantly associated with moderating effects of maternal adversity and benefiting child language competence (P=0.004).	Level I	C
Van Horne et al., 2022	Significant reduction in EPDS scores for IG and control groups (CG) (p<0.001), no significance between groups. Self-efficacy significantly higher in IG compared to CG at 6 months postpartum (p=0.054). Bonding scores for IG and CG improved 6 months postpartum, no significance between groups (p=0.185).	Level I	C
Kliem and Sandner, 2021	No significant difference in school performance or child life satisfaction. Mental health significantly improved in IG (p=.004) and abusive parenting reduced (P=0.03). IG reported fewer child problem behaviors (p= 0.02).	Level I	A
Ammerman et al., 2013	Significantly greater improvement in depression symptoms in the IG (p < .01). 70.7% of mothers in the IG no longer depressed at posttreatment.	Level I	B

## Significance of Results

- HVPs reduced emergency medical care use and referrals to Child Protective Services.<sup>3</sup>
- Abusive parenting is reduced among families participating in HVPs.<sup>4</sup>
- Postpartum depression and mental health issue rates are reduced when HVPs are utilized.<sup>1, 4, 6</sup>
- Language competency and school performance is improved when HVPs are utilized.<sup>4, 5</sup>

## Implications for CNL

### Education:

- Provide educational tools to strengthen relationships between mother and child and skills for coping, childcare, and adjusting to new roles.
- Educate with the use of knowledge of best practice gained through research.

### Risk Assessment:

- Recruit qualifying mothers for services.
- Identify those who will benefit from HVPs.

### Multidisciplinary coordination:

- Referral and coordination with other community or physician services as needed.

## Conclusion

- 5 peer reviewed RCTs studying the impact of HVPs for at risk mothers and children reviewed.
- 4 studies report significant improvement in measured outcomes for IG compared to CG.<sup>1, 3, 5, 6</sup>
- 1 study reports that there is improvement in outcomes in both IG and CG with no significant difference between groups.<sup>4</sup>
- HVPs is an effective strategy to improve family dynamics in at risk populations.
- No studies report negative effects related to HVPs.

## Bibliography



## Notes

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