

Prenatal to Early Infancy Programs that Work:

What We've Learned, What We Face, and What We Need



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Effective Programs for Early Child Development:
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What We've Learned

- Home visiting - findings from meta-analyses and recent studies:
 - consistent, inconsistent, and null effects
 - modest effects in general
 - larger effects with higher risk families
 - larger effects in efficacy vs. effectiveness studies
 - importance of helping relationship
 - importance of implementation fidelity
 - professional vs. paraprofessional
 - universal vs. targeted
- Similar pattern of findings in meta-analyses of prevention programs for school-age children and youth
- Long-term effects and cost-effectiveness

Sources: Alper, 2002; DuBois et al., 2002; Gomby et al., 1999; Elkan et al., 2000; Guterman, 1999; Kendrick et al., 2000a, 2000b; Korfmacher et al., 1999; Leventhal, 1996; MacLeod & Nelson, 2000; MacMillan, 2000; MacMillan & CTFPHC, 2000; NRC & IOM, 1999; Offord & Bennett, 2002; Olds et al., 2002; Reynolds et al., 2001; Roberts et al., 1996; Wilson et al., 2003



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What We've Learned

- 6 pitfalls in the history of child abuse prevention:
 - Oversimplifying the problem of child abuse
 - Overstating prevention's potential
 - Misrepresenting target populations
 - Failing to establish partnership with CPS
 - Compromising depth/quality for breadth/coverage
 - Failing to engage public and political agendas

Source: Daro & Donnelly, 2002



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Putting children and families first



What We Face

- Real-world challenge: Going to scale
 - efficacy to effectiveness
 - effectiveness to dissemination
 - sustainability
- Human resource challenge: Revisiting Albee's (1959) person-power problem
 - inherent limitation of both home visiting and clinical models
 - unique limitations of paraprofessional and professional models

Sources: Albee, 1959; Offord & Bennett, 2002; Streiner, 2002



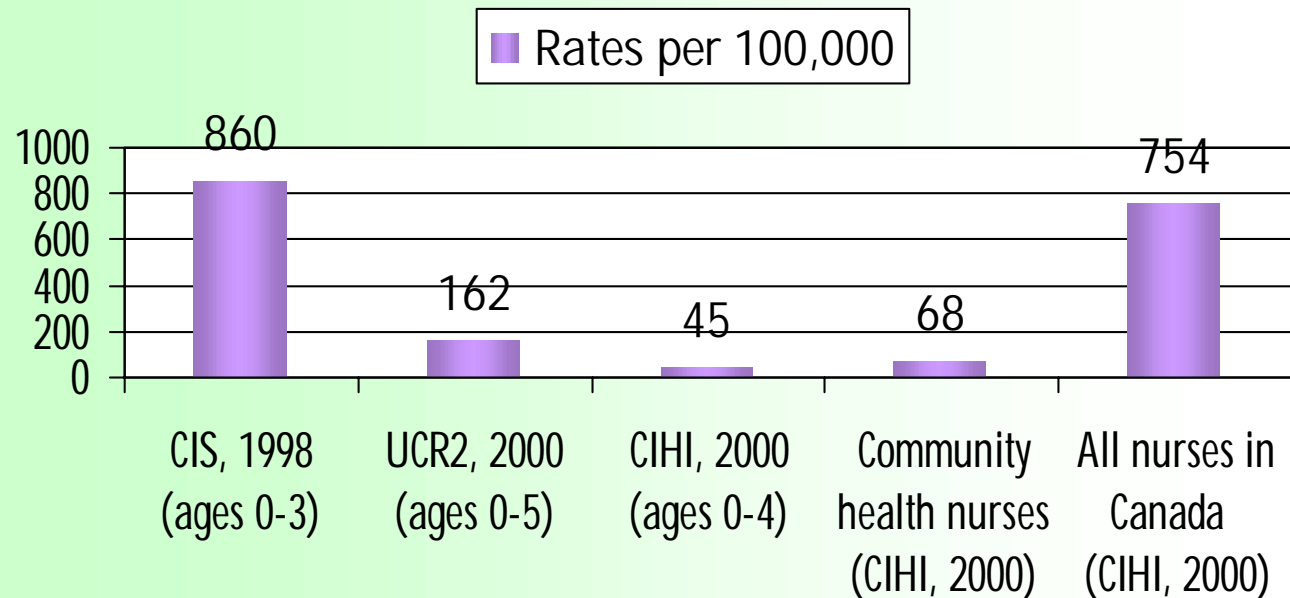
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What We Face

What if the Nurse Home Visiting Model was Implemented Across Canada?



Sources: CIHI, 2001; Canadian Nurses Association, 2002; Statistics Canada, 2001, 2002; Trocme et al., 2001



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What We Face

- Service delivery challenge: Finding and engaging families in home visiting programs
 - targeting problem
 - attrition problem
- System of care challenge: Developing and investing in the best policy mix for children and families
 - tradeoffs of universal, targeted, and clinical approaches
 - need for community-by-community approach

Sources: Gomby et al. 1999; Emery & Laumann-Billings, 2002; NRC & IOM, 1999, 2000; Offord & Bennett, 2002



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What We Need

- Studies of new interventions, effectiveness and dissemination of interventions
 - including limiting factors (e.g., domestic violence)
 - including mediators and moderators
- Studies of risk/protective mechanisms and effective ingredients of intervention
 - including how to improve effectiveness of paraprofessionals

Sources: Baranowski et al., 1997; Eckenrode et al., 2000; Hoagwood & Olin, 2002; Hohmann & Shear, 2002; Kraemer et al., 2001, 2002



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What We Need

- ECD system of care
 - home-based, centre-based, other approaches
 - multilevel: universal, targeted, clinical
- ECD knowledge system
 - community-level, population-based, longitudinal
 - building on NLSCY and other data sources
- . . . remember how programs “work”
- . . . build the system one stage at a time

Sources: ACYF, 2002; Daro & Donnelly, 2002; NRC & IOM, 1999; 2000; O'Connor, 2002; Offord & Bennett, 2002; Sanders et al., 2002



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Some Key Questions . . .

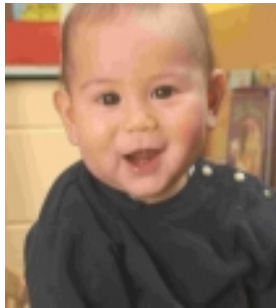
- How can we maximize the roles and real-world effectiveness of professionals and paraprofessionals in home visiting and the ECD system of care?
- What universal interventions are needed to reduce the size of both clinical and targeted populations?
- How can we sustain the outcomes of effective prenatal and infancy programs through to adulthood?

For more information on Healthy Child Manitoba, please visit our website at: www.gov.mb.ca/hcm



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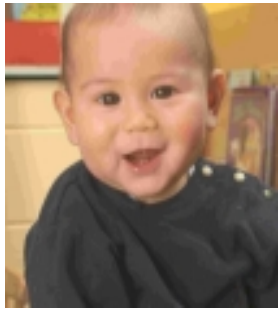
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