2-Year Outcomes from the Healthy Families Oregon Randomized Study

Study Background
In 2009, NPC Research received a grant from the U.S. Department of Health and Human Services, Children’s Bureau, to conduct a randomized study of the Healthy Families Oregon (HFO) program. The study had three major goals:

1. To evaluate the effectiveness of HFO in promoting positive parenting and child wellbeing;
2. To examine the impact of HFO on documented child maltreatment reports and other outcomes obtainable from state administrative data sources; and
3. To develop an interactive web-based tool to support cost analysis of home visiting programs in Oregon and nationally. This tool is now available at: [http://homevisitcosts.com](http://homevisitcosts.com)

The study included participants from HFO programs in the following Oregon counties:
- Clackamas
- Deschutes
- Douglas
- Jackson
- Lane
- Marion
- Polk
- Salem
- Lorain


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What Did We Do?

- 2,667 eligible high-risk families with newborn infants were randomly assigned to either:
  - Participate in the HFO program; or
  - Receive basic information and referral resources (control group)
- 1 year after random assignment, parent interviews were conducted with 803 HFO and control parents.
- 2 years after random assignment, the following outcomes were obtained from a variety of state administrative data sources to examine outcomes including:
  - Child abuse and neglect reports
  - Foster care placements
  - Health insurance coverage and preventive health services utilization
  - Self sufficiency and nutritional assistance program service utilization
  - Use of substance abuse treatment services

What Did We Learn?

**Key Finding 1: HFO families provided more early support for school readiness for their children.**

- HFO parents were more likely to read to their babies on a daily basis, compared to parents in the control group.
- HFO parents provided more frequent developmentally supportive activities for their babies, compared to parents in the control group.
94% of babies in the HFO group had received developmental screening in their first year of life, compared to only 86% in the control group.

Only 5% of HFO infants had early signs of atypical development, compared to 9% of infants in the control group.

**Key Finding 2:** HFO mothers were less stressed than mothers in the control group, an important factor in reducing risk for maltreatment.

- HFO mothers scored significantly lower on the Parenting Stress Index (PSI), compared to control group mother. The PSI is a validated measure of parent stress, which has been linked to risk of child abuse and neglect.

**Key Finding 3:** There were no differences in the number of founded reports for HFO vs. control children.

- However, overall, HFO children had somewhat more unfounded reports, compared to controls.
- Home visitors in high-risk homes who are mandated reports may need to make child welfare reports that would otherwise go unnoticed, sometimes known as a “surveillance effect.”
- While few of the founded reports for HFO children occurred while the family was enrolled in the program (14% of founded reports), half of all unfounded reports (49.5%) occurred while families were receiving home visiting.

**Key Finding 4:** Parents in HFO were more likely to have enrolled in TANF for the first time, and received more Supplemental Nutritional Assistance Program services compared to controls.

- 45.2% of HFO mothers, compared to only 39% of control mothers, enrolled in TANF for the first time after their child’s birth.
- HFO mothers received almost a full month more days of Supplemental Nutrition Assistance, compared to controls.

**Key Finding 5:** More mothers in the HFO group received substance abuse treatment, compared to controls.

- One out of every 20 mothers in HFO (5%) was successfully referred for substance abuse treatment services, compared to only 3.2% of controls.

**Key Finding 6:** Duration of HFO services made a difference.

- Within the HFO program, mothers or children who remained in the program longer and received more home visits had:
  - Fewer gaps in health insurance coverage
  - More days of OHP enrollment
  - More immunization services
  - More well-baby services
- Families who remained in services longer tended to be:
  - Older (non-teenaged) mothers
  - Have reported relationship problems at program entry
  - Have been screened by HFO prenatally

**Implications & Next Steps**

- Results from this 2-year follow-up study are consistent with other studies of the Healthy Families America Model conducted in New York and Massachusetts. Specifically findings from all of these studies suggest:
  - Positive, if modest early outcomes related to improved parenting and well being
  - Increased early support and services to families
  - Evidence of “surveillance” effects for child welfare reports in the early years
- Longer term follow-up to examine other key long-term outcomes is needed.
- Many early prevention programs find stronger results with potential cost-savings when children enter school and become teenagers.