

FROM AMERICA INTO OUR HOMES

ANFPP – A new program to support young indigenous Mums and their children



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Central Australian Aboriginal Congress



NFP in America

- NFP - Nurse Family Partnership Program 
- Prof. David Olds started in the 70's in the US
- Developed a **Home Visiting Program** start visiting women before 28 weeks pregnant until 2nd birthday of child
- Today NFP is 29 States in the US and has been internationally replicated in Canada, Netherlands, Germany, UK and since 2009 in Australia. ANFPP



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Purpose of NFP ?

Improve **health, well-being** and **self-sufficiency** of young parents and their children.



Goals

1. **Improve pregnancy outcomes**, by improving women's pre-natal health
2. **Improve child health and development** by supporting parents to provide more skilled parenting
3. **Improve parents economic self-sufficiency** by helping parents to plan future pregnancies, to complete their education and find work.



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Why **NFP** ? The Evidence

Research in the US has show significant outcomes in the following areas.

- Improved prenatal health
- Reduction in childhood injuries
- Fewer subsequent pregnancies and greater intervals between births
- Increases in fathers' involvement
- Increases in Maternal Employment
- Higher developmental scores at 6, 12, 24 month
- Improved readiness for school (low resource mothers)
- Fewer hospital admissions for children
- Decreased cases of notified child abuse and neglect
- Less involvement in the criminal justice system of teenagers (15-20 year follow up of NFP children)
- Lower rates of substance misuse in teenagers (NFP children) and mothers



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From NFP to ANFPP

- Australian Government “bought” the NFP model as part of “Closing the Gap” initiative/funding/commitment
- In the US there have been large long term return for investments
- Transferred into Indigenous context and replaces “low socio-economic status” with “expecting an indigenous child” criteria
- Central Australian Aboriginal Congress is one of three initial ANFPP pilot sites, including a Cairns AMS (QLD), Melbourne AMS (VIC)
- Recent recruitment of Wellington AMS (NSW) & Brisbane AMS (QLD) and two more sites to be announced later this year



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Distinguishing features of ANFPP

- Intensive Training for all staff in the NFP model
- Structured Program
- Strong QI focus
- National ANFPP Support Service and linkages between sites and Uni of Colorado (Prof Olds)
- **The ANFPP Team:**
 - Nurse Supervisor
 - Nurse Home Visitors
 - Aboriginal Community Workers



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Theories and Principles

3 Underpinning Theories

- **Ecological theory** [Bronfenbrenner]
Social context
- **Self-efficacy theory** [Bandura]
Believe in self, empowerment
- **Attachment Theory** [Bowlby]
Secure attachment to create resilience to take on life's challenges



5 Client Centred Principles

- The client is the expert on her own life
- Follow the client's motivations/heart desires
- Focus on strengths
- Focus on solutions
- Change starts with small steps



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Eligibility Criteria for ANFPP

- Pregnant with indigenous child (some sites first time Mums only)
- Living (and intending to stay) in Service Area
- Less than 28 weeks pregnant



Referrals are received from ANC providers, other agencies, self or family referrals are also encouraged.



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The Home Visit / Domains

- Client is visited by the same Nurse Home Visitor and throughout the program
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- NON-CLINICAL ROLE !
- Frequency is mostly every 2 weeks (weekly at some stages)
- Content of visits is prescribed (Pregnancy, Infancy and Toddler ANFPP guidelines)

The 6 program domains:

1. Personal Health
2. Environmental Health
3. Life Course Development
4. Maternal Role
5. Family and Friends
6. Health and Human Services



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What happens at a Home Visit ?

- Greeting
- Issues and Concerns
- Review and Report
- Assessment
- Planned guidance
- Summary and goal setting
- Planning for next visit



- **Methods**

Talking, pictures, role plays, DVDs, field trips, play time, scrap booking, interactive materials, filming, it is FUN !



Parent –Child Interaction

- Learning about cues, responsiveness of parent/child
- Use of **developmental assessment tools** to guide activities/play e.g. communication, gross motor, fine motor, problem solving, personal-social





Local implementation

Central Australian Aboriginal Congress (CAAC)

- “Aboriginal Health in Aboriginal Hands”
- CAAC established 37 years ago, based in Alice Springs

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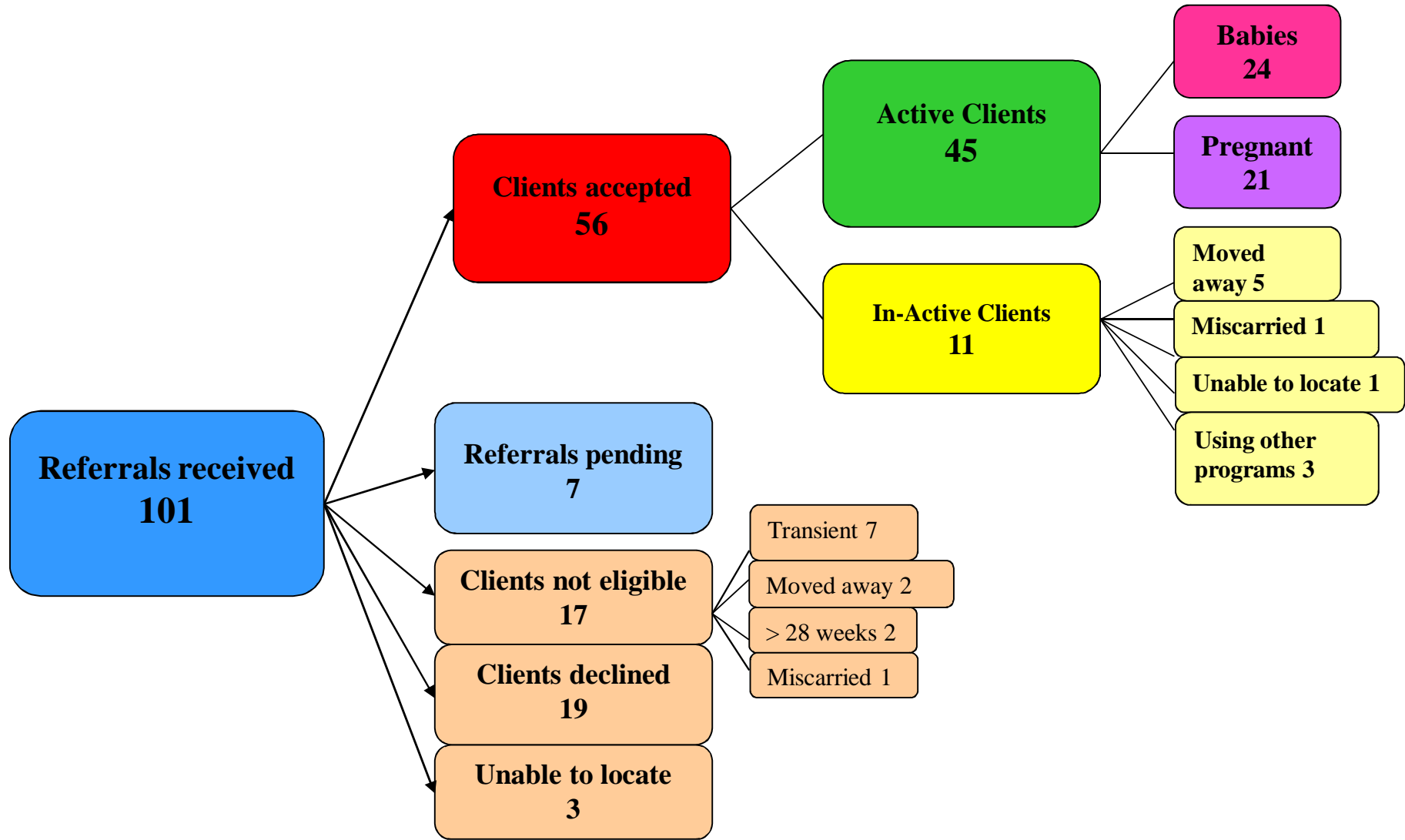
- **Congress Alukura** is a Branch of CAAC and is an Aboriginal Women’s health and birthing Centre.
- Alukura (*Arrente word meaning “women’s camp”*) is a women’s only service and site.
- ANFPP sits under the Alukura Branch.



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Where are we up to with client referrals (01/07/2010)



Challenges

- Implementation of a new program
- Transient population
- Many clients with very complex issues
- Ongoing engagement of clients
- Balance between “fidelity and reality”



Successes

- Good program set up
- Program gaining more and more interest of potential clients and agencies
- Smooth referral pathways/integration within PHCO
- First data promising e.g. around smoking cessation
- Many “**Good news stories** with clients” around self-efficacy, attachment, making good and safe choices for themselves and baby



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QUESTIONS ?

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We are also in the process of recruiting **ADDITIONAL** Nurse Home Visitors.
See us if you are interested to join this great program and our enthusiastic team !



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