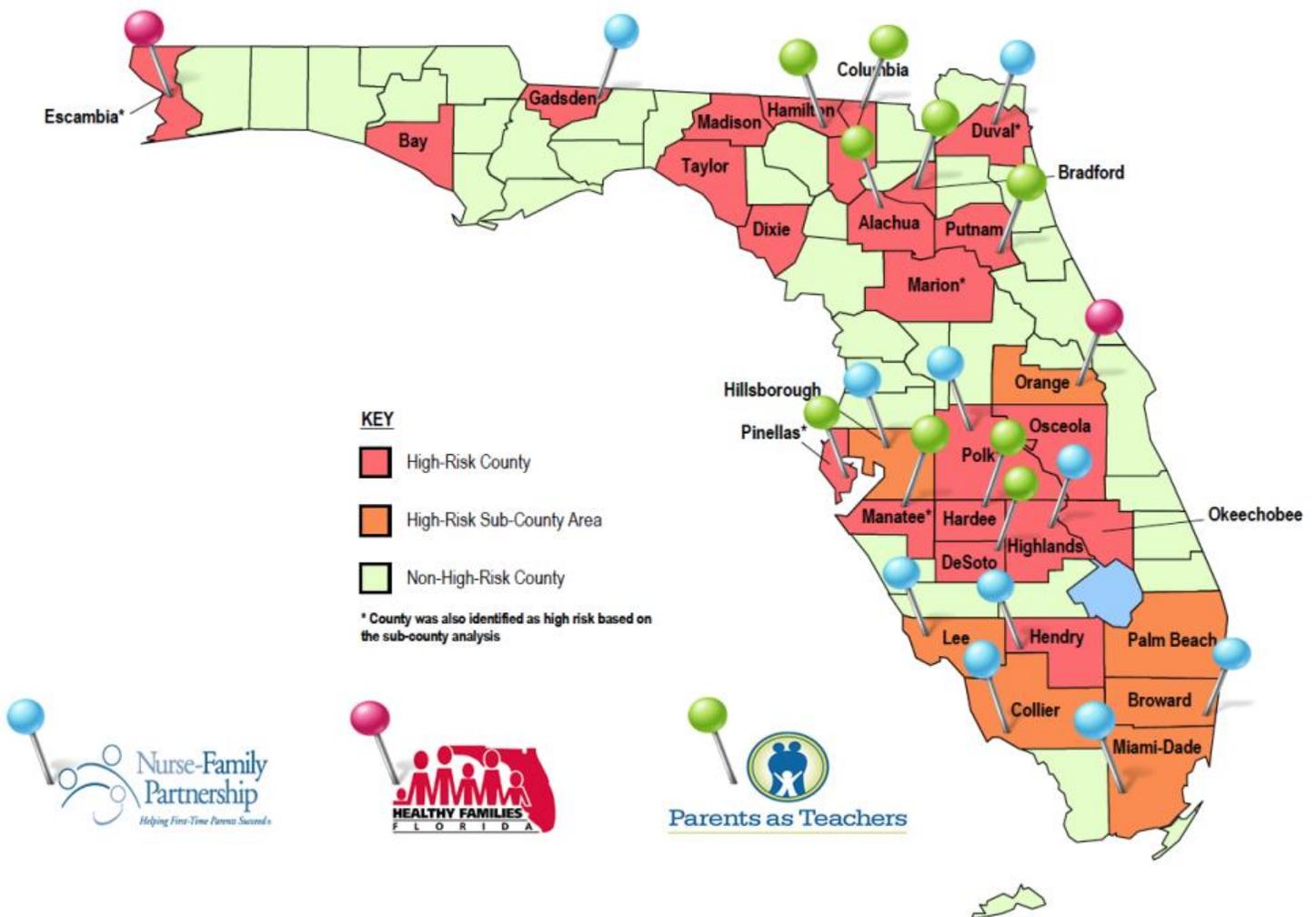


Florida Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Evaluation Overview

Program Profiles 2015



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Chiles Center for Healthy Mothers and Babies

Table of Contents

Introduction.....2

Broward County.....3

Duval County.....6

Escambia County.....9

Hillsborough County.....12

Manatee County.....15

Miami-Dade County.....18

North Central Florida Counties.....21

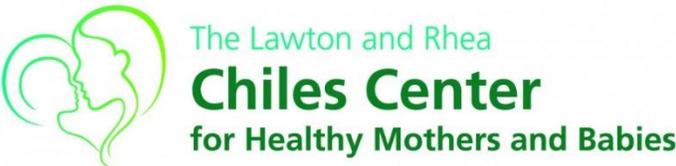
Orange County.....25

Pinellas County.....28

Southwest Florida Counties.....31

Program Evaluation Team Information.....36

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Introduction

This report includes a compilation of research summaries of feedback from staff, participants, and community partners in the Florida Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program. We included brief excerpts from data collected in 2014 and 2015 from 11 programs in 14 counties implementing MIECHV. In fall of 2014, there were a total of 32 interviews and focus groups conducted with 81 total MIECHV program staff, including 17 administrators (21%), 15 supervisors (19%), and 49 home visitors (60%). Additionally, we share brief insights and quotes derived from 103 total interviews with program participants representative of the ethno-racial and linguistic diversity of families participating in Florida MIECHV. The participant interviews were conducted in English (79), Spanish (15), and Haitian/Creole (9), and with 101 women and two male caregivers/parents. Forty participants identified their race as Black (39%), 19 identified as White (18%), 5 identified as Other (5%), 26 identified as Hispanic (25%), and 12 identified as Haitian-Creole (12%).

Another element of interest in the MIECHV program evaluation is the extent to which collaborative community partnerships are built between each MIECHV program and agencies in the surrounding area to meet specified benchmark goals. The benchmark sectors include: maternal and child outcomes; family economic self-sufficiency; child abuse and neglect along with reduction in emergency visits; school readiness and achievement; and crime or domestic violence. A total of 303 partners were identified by the 11 MIECHV programs in 12 communities (one program served two distinct communities); each programs' collaborative relationships were described by program partners through the PARTNER Tool Survey (<http://www.partnertool.net/>) which was administered in 2014 and again in 2015. These relationships are illustrated through social network maps in this report. A network map depicts each dot as an agency specified as a MIECHV collaborator, with lines connecting each dot representing the connections between each agency in the network. The program partners were further identified by benchmark area in 2015, allowing individual MIECHV programs to examine where partnerships are thriving in their communities, which benchmarks are being addressed, and where new partnerships may be needed.

The full reports describing the results of MIECHV staff interviews and focus groups, program participant telephone interviews, and the PARTNER survey collaboration analysis can be found on the Florida MIECHV website (<http://flmiechv.com/what-we-do/measuring-results/>) and USF MIECHV Evaluation website (<http://health.usf.edu/publichealth/chiles/miechv/state-evaluation.htm>).

The MIECHV program prides itself in offering supportive services to mothers who reside in the most high-risk communities across the state of Florida. To capture the characteristics of the communities where MIECHV program is serving families, the ArcGIS software was used to map where participants reside in comparison to specific demographic factors in the particular county per the 2010 U.S. Census data and 2013 American Community Survey. With this in mind, the summaries also contain Geographic Information System (GIS) maps that were constructed to visually depict the relationship between where MIECHV participants live with the percentage of unemployment, uninsured, and poverty of that county at the census-tract levels.

MIECHV Evaluation Overview

Broward County



Focus groups and interviews conducted with NFP staff in Broward County:

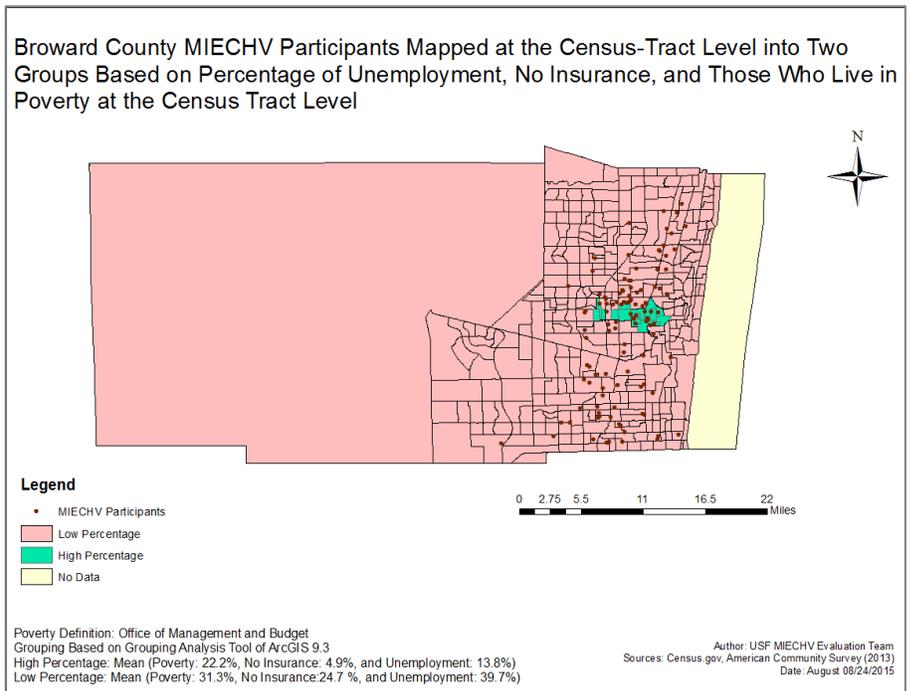
What do you consider the biggest strength(s) of your program?

The MIECHV Program staff in Broward County expressed that being able to stay well informed on the needs of the women within their community was a critical strength of their program. The staff found further advantages in providing assistance (e.g., accessible public transportation, Healthy Start services, and prenatal risk screens) through the MIECHV Program to families with high needs who live in rural areas. With regard to the workplace environment, retaining qualified, multi-lingual, knowledgeable, and supportive colleagues were all imperative qualities discussed. Lastly, the NFP staff elaborated on how their program encourages the development of a trusting mentor-friend relationship between the nurse home visitors and the clients at each visit.

“The leveraging of the additional services that these babies can get is probably impressive.” – Administrator

“Nurses are not only a trusted profession, but they’re very knowledgeable about pregnancy, child development, and all that kind of thing.” – Supervisor

“I believe the strength of the program for me, after all that they said, is knowing that every next visit when we have too many of the clients, there’s always a change. There’s always an improvement on the client quality.” – Home Visitor



What do you think are the most important outcomes of the program?

Broward County’s MIECHV Program staff stated that the most important outcome of the program was the ability to empower women. One way they instill empowerment is through helping immigrant mothers adapt to and thrive in their new life in the United States. Other crucial outcomes of the program involved building stronger bonds between the mother and her baby, along with reducing the rates of low birthweight and preterm births.

“Well, connecting them with resources that are not available, that they’re not aware of in the community...” – Administrator

“To me, it will be big one like for my clients being able to adapt to a new country and to go forward in life.” – Home Visitor

What are some outcomes of the program that would be hard to measure?

The Broward County MIECHV Program staff identified themes among participants that were hard to measure, such as self-sufficiency, learning to cope, prioritizing, and taking the opportunity to change their lives. The staff also mentioned how it would be difficult to quantify the desire of the clients wanting to be mothers and wanting the best for their child.

“Hard to measure – is probably the self-efficacy kind of goals because sometimes clients go back to work and school, and then they leave the program.” – Supervisor

“Because we are still a new program, sometimes it is difficult to measure like on the cost-effectiveness of the program because we have clients that are diabetic, have high-blood pressure during pregnancy, and they’re having a C-section, and they’re having NICU babies.” – Home Visitor

Phone interviews conducted with Broward County MIECHV Program participants:

What does the home visiting program mean to you and your family?

Generally, most women voiced thanks for the informational support provided. However, the relationships (i.e., emotional support) that participants formed with their home visitors seemed to mean the most to participants.

“For a mother, especially a first time mother, this help is essential.”

“They care for the first time mommies for them to be knowledgeable of things that are going on and you know.”

“I think it’s a really good program and it could help at least in a lot of things, from a lot of bad things from happening down the road.”

“It’s always good to have someone, a more experienced person to be around that you can actually talk to them, to get you ready, and prepared for what’s to come.”

“I think it’s been really good for me and my family.”

“I don’t think I would be as knowledgeable as I am about certain things, and that I wouldn’t know what to do sometimes.”

PARTNER Tool survey 2014-2015 administered with Broward County MIECHV collaborators:

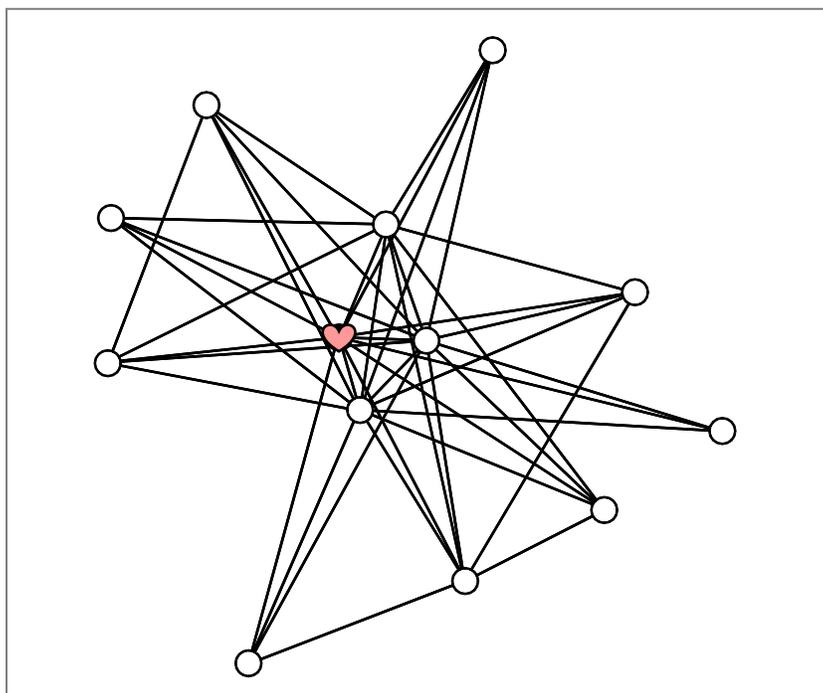
Select the organizations with which you have an established relationship (either formal or informal).

Collaboration among organizations and groups was measured through the **Program to Analyze, Record, and Track Networks to Enhance Relationships (PARTNER Tool)** survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of Nurse-Family Partnership in Broward County.

Time I Survey (Summer 2014)

Number of Participants: 8/13

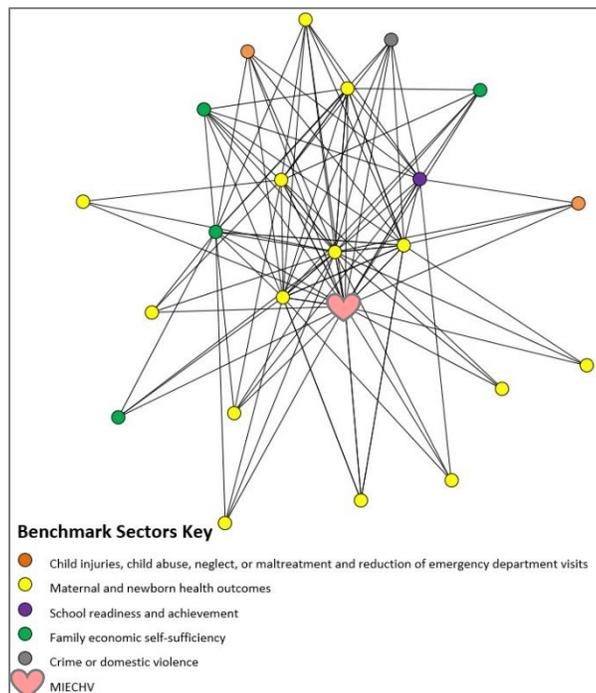
Response Rate: 52.6%



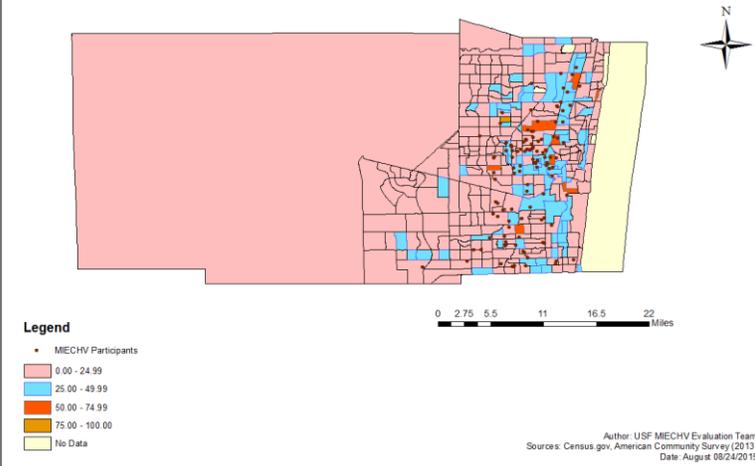
Time II Survey (Summer 2015)

Number of Participants: 13/23

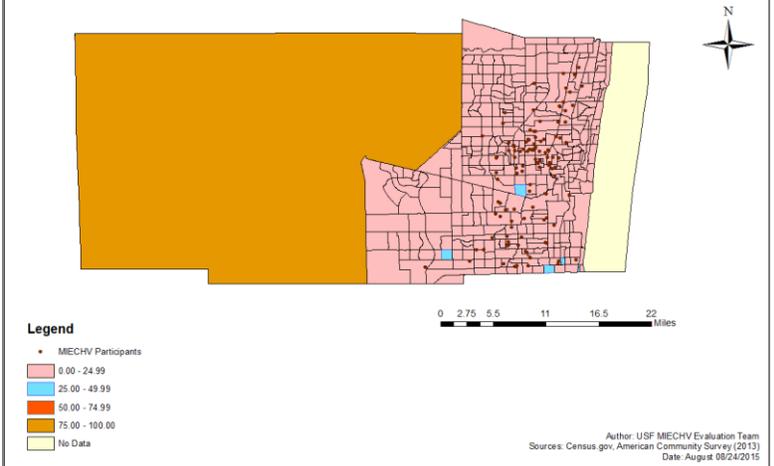
Response Rate: 46.6%



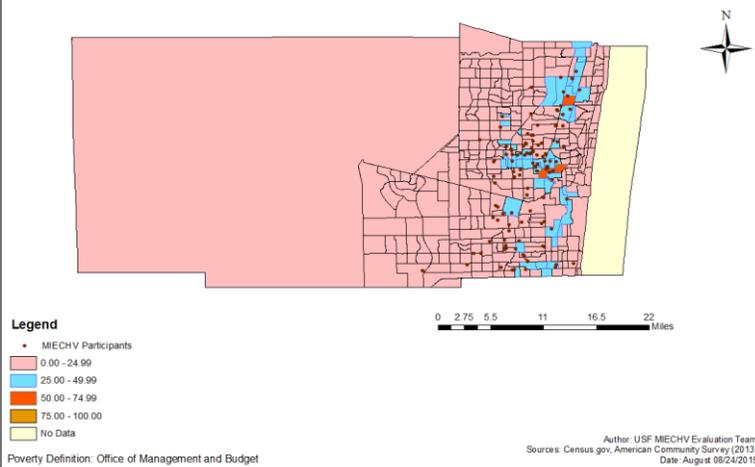
Broward County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



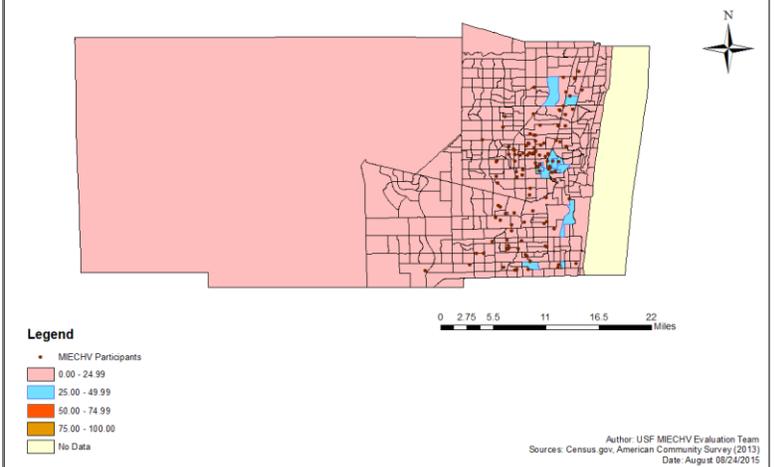
Broward County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



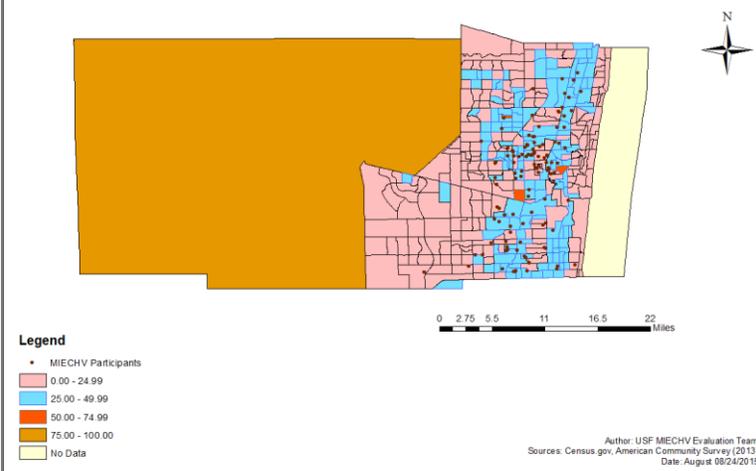
Broward County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



Broward County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Unemployed Individuals at the Census Tract Level



Broward County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



MIECHV Evaluation Overview

Duval County



Focus groups and interviews conducted with NFP staff in Duval County:

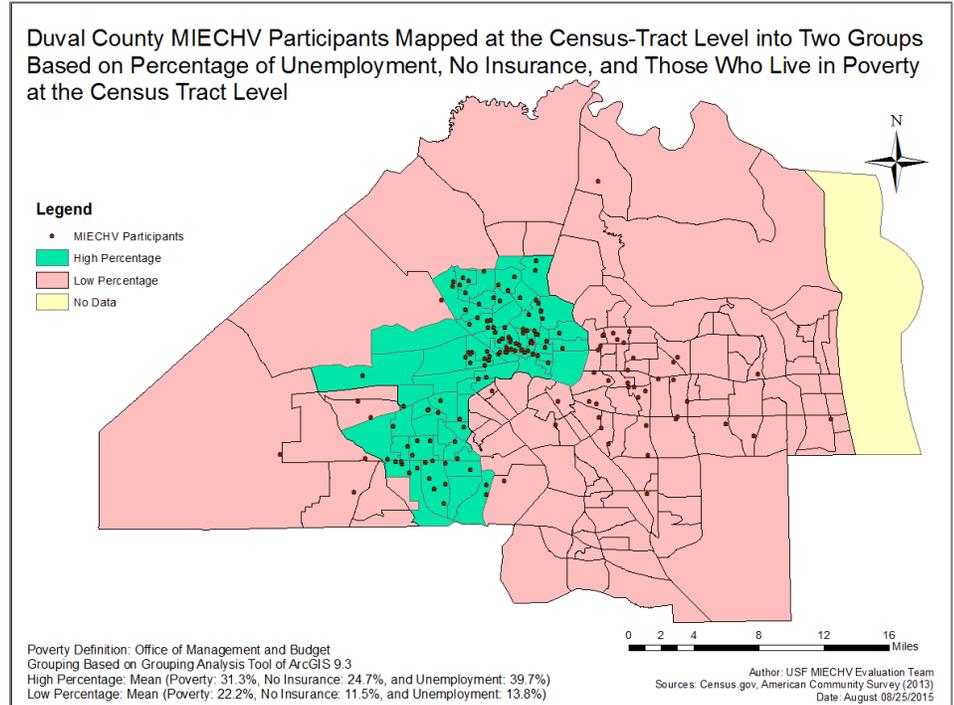
What do you consider the biggest strength(s) of your program?

The MIECHV program staff from Duval County expressed that having the ability to retain their staff was a critical strength of their program. Additionally, the NFP staff elaborated on how their nurse home visitors were caring, committed, and invested in each of their clients. Lastly, the staff found further advantages on how the Nurse-Family Partnership curriculum builds on past lessons with each family, therefore encouraging the moms to continue to learn to take care of themselves and their children.

"I think the biggest strength for us, all of us, is the fact that we use the Healthy Start screen as one intake."

"...because of the partnerships that we have in place and the collaboration. The fact that we were able to get to capacity according to the Nurse-Family Partnership model where it's 25 women per nurse."

"I think the longevity of the program allows us to make an impact on the client's outcomes because we're in their homes for at least two and a half years."



What do you think are the most important outcomes of the program?

Duval County's MIECHV program staff stated that the most important outcome of their program was the ability to empower women. Other crucial outcomes for mothers enrolled in the MIECHV program included attaining self-efficacy and economic-sufficiency. The staff also reported getting mothers ready for a healthy pregnancy and helping them develop better family planning practices. Lastly, the nurse home visitors help to strengthen parenting skills, increase family engagement, as well as build stronger bonds between the mother and her baby.

"Trying to increase breastfeeding, for moms to breastfeed."

"A big thing with us is that fatherhood involvement."

"Well even in family goals, like just seeing them graduate, they're very, very proud; and there's lots of fatherhood involvement to incorporating them, and walking across the stage, and then plans for a bigger and better future."

What are some outcomes of the program that would be hard to measure?

Duval County's MIECHV program staff identified themes among participants that were hard to measure, such as quantifying the desire of their clients to want to be better parents. The staff also mentioned how it would be difficult to measure father involvement, the development of healthy family relationships, and early learning through the provision of available books for the children within the NFP program.

"Desire to be a better parent."

"I think family engagement because it goes beyond just the client. Oftentimes, it's grandma, it's the mother."

Phone interviews conducted with Duval County MIECHV program participants:

What does the home visiting program mean to you and your family?

Generally, most women voiced thanks for the informational support provided. However, the relationships (i.e., emotional support) that participants formed with their nurse home visitors seemed to mean the most to participants.

"It means everything. We get to learn. She comes out, and we build our relationship so it's somebody new to introduce my son too that can help him and guide him, I mean – it's my life. I actually look forward to her coming – she comes tomorrow, I'm like so excited."

"A lot. I think that I'd be pretty clueless if I didn't have my nurse..."

"I recommend it to any and everybody, not only just first time moms but even parents that already have kids because I believe that it makes a big difference."

"I really don't know what I would do without her or how to be the parent that I am today, so it really means a lot."

"Exciting. Just that one word sums it all up."

"It just helps me a lot to keep level-headed when she comes every two weeks."

"We can talk and I could talk to her about what I had going on, and she just gives some of her best advice to help me get through what I'm going through."

PARTNER Tool survey 2014-2015 administered with Duval County MIECHV collaborators:

Select the organizations with which you have an established relationship (either formal or informal).

Collaboration among organizations and groups was measured through the **Program to Analyze, Record, and Track Networks to Enhance Relationships (PARTNER Tool)** survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of Nurse-Family Partnership in Duval County.

Time I Survey (Spring 2014)

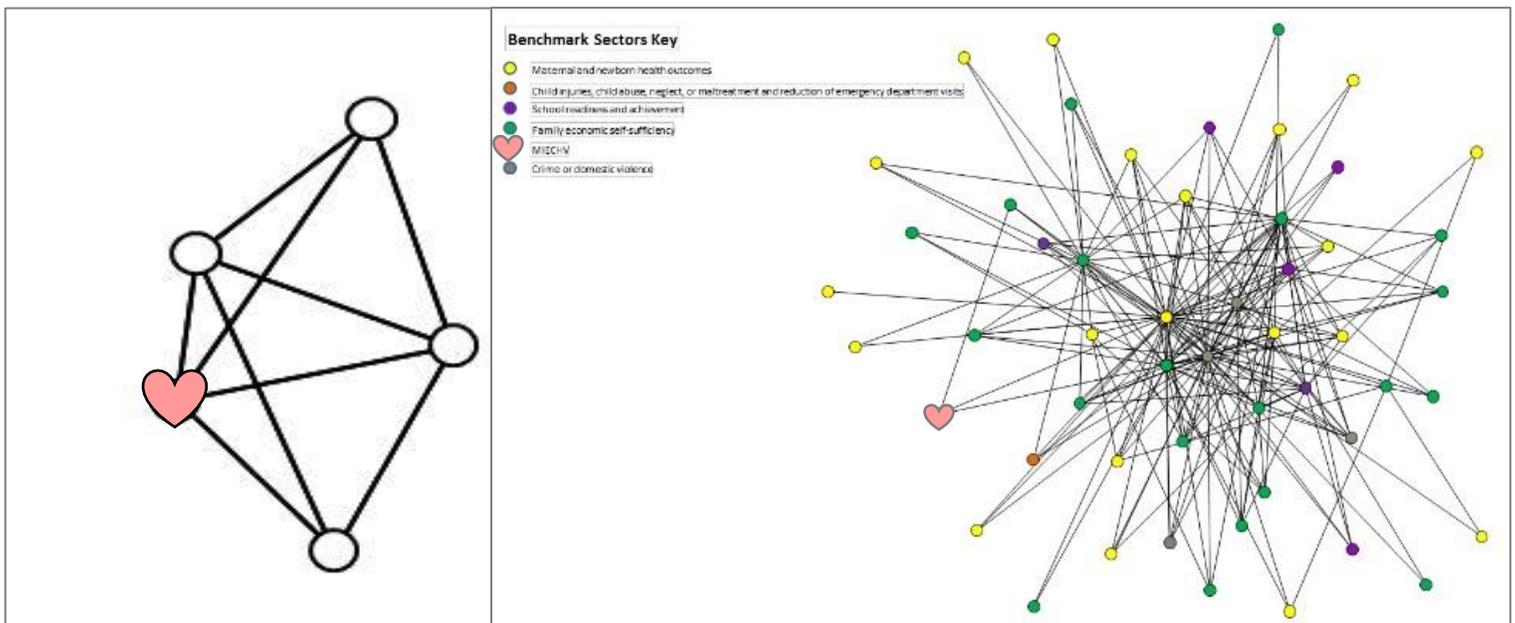
Number of Participants: 5/6

Response Rate: 61.3%

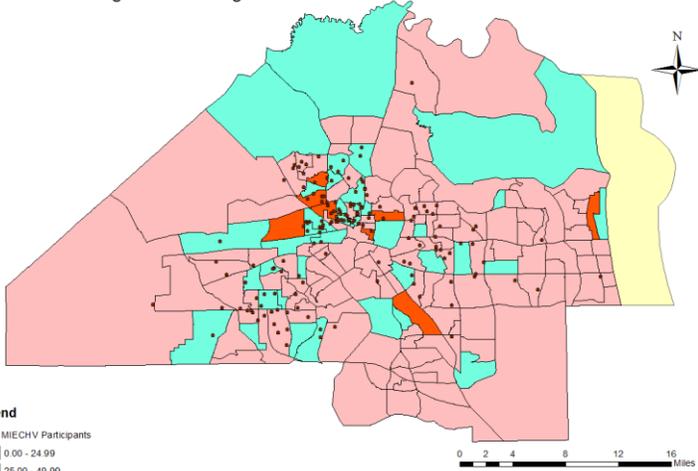
Time II Survey (Summer 2015)

Number of Participants: 26/56

Response Rate: 38.7%



Duval County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level

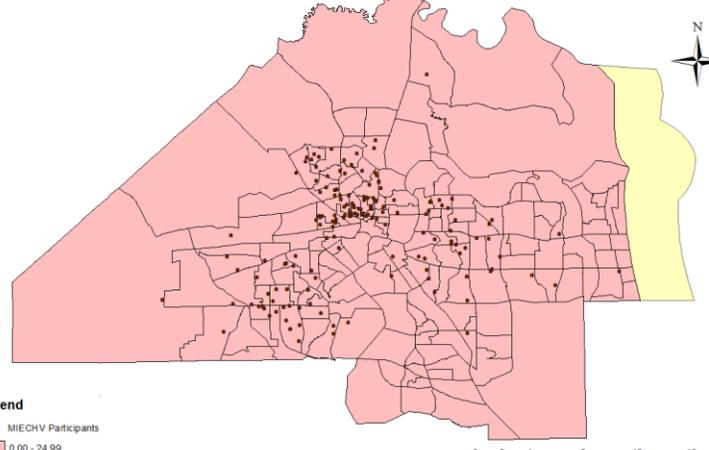


Legend

- MIECHV Participants
- 0.00 - 24.99
- 25.00 - 49.99
- 50.00 - 75.00
- No Data

0 2 4 8 12 16 Miles
 Author: USF MIECHV Evaluation Team
 Sources: Census.gov, American Community Survey (2013)
 Date: August 08/25/2015

Duval County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level

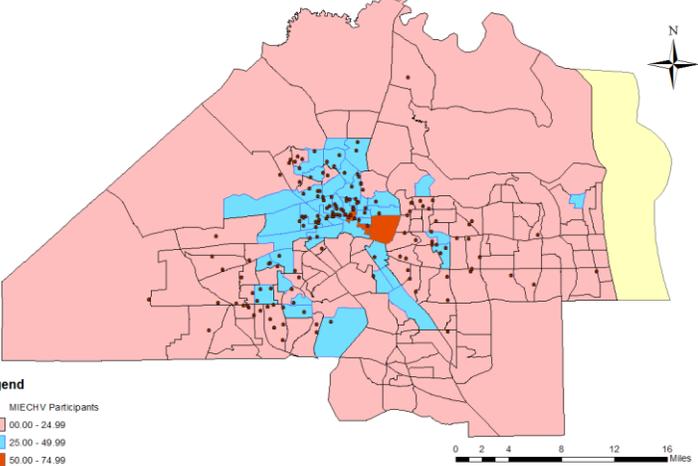


Legend

- MIECHV Participants
- 0.00 - 24.99
- 25.00 - 49.99
- 50.00 - 75.00
- No Data

0 2 4 8 12 16 Miles
 Author: USF MIECHV Evaluation Team
 Sources: Census.gov, American Community Survey (2013)
 Date: August 08/25/2015

Duval County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



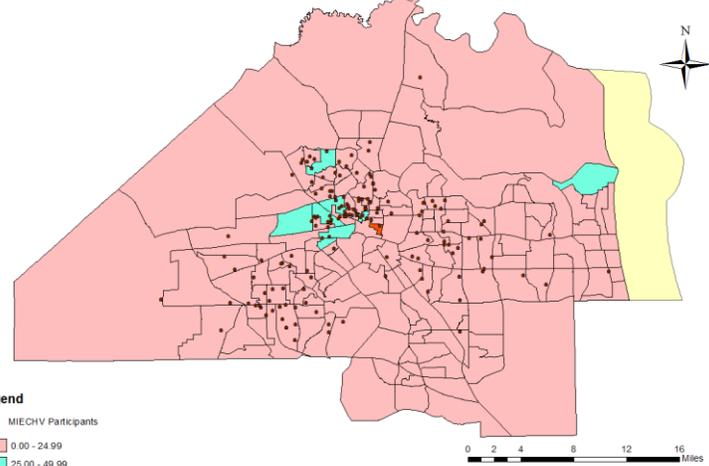
Legend

- MIECHV Participants
- 00.00 - 24.99
- 25.00 - 49.99
- 50.00 - 74.99
- 75.00 - 100.00
- No Data

Poverty Definition: Office of Management and Budget

0 2 4 8 12 16 Miles
 Author: USF MIECHV Evaluation Team
 Sources: Census.gov, American Community Survey (2013)
 Date: August 08/25/2015

Duval County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Unemployed Individuals at the Census Tract Level

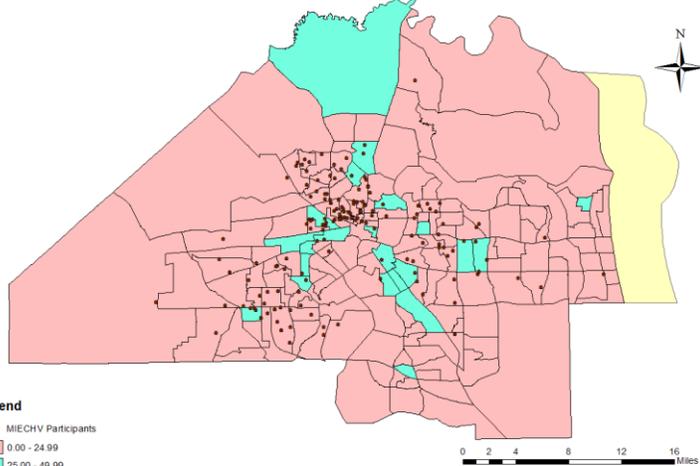


Legend

- MIECHV Participants
- 0.00 - 24.99
- 25.00 - 49.99
- 50.00 - 75.00
- No Data

0 2 4 8 12 16 Miles
 Author: USF MIECHV Evaluation Team
 Sources: Census.gov, American Community Survey (2013)
 Date: August 08/25/2015

Duval County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



Legend

- MIECHV Participants
- 0.00 - 24.99
- 25.00 - 49.99
- 50.00 - 75.00
- No Data

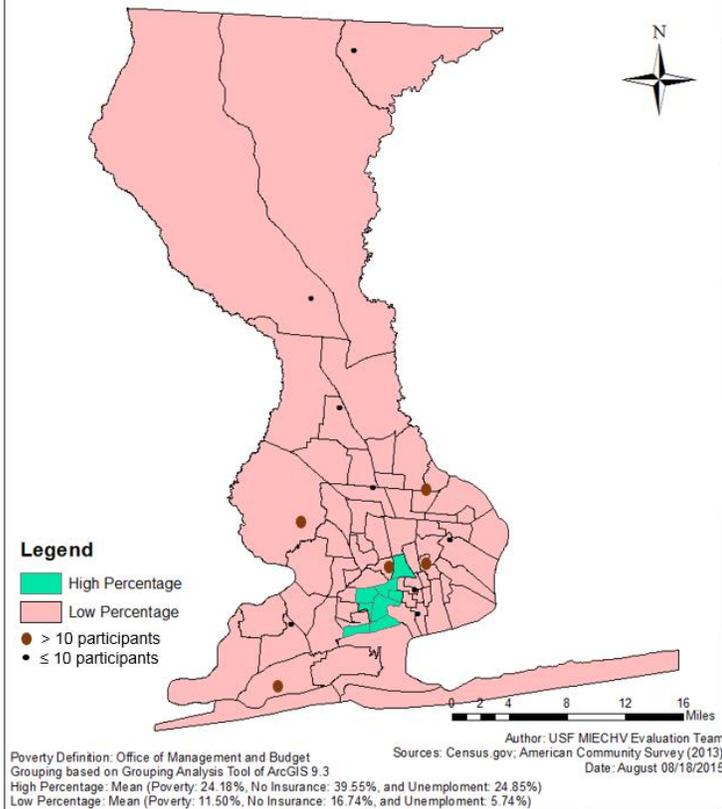
0 2 4 8 12 16 Miles
 Author: USF MIECHV Evaluation Team
 Sources: Census.gov, American Community Survey (2013)
 Date: August 08/25/2015

MIECHV Evaluation Overview

Escambia County



Escambia County Participants Mapped at Zip Code Level to Two Groups Based on Census Tract Level Percentage of Unemployment, No Insurance, and Those Who Live in Poverty



Focus groups and interviews conducted with staff:

What do you consider the biggest strength(s) of your program?

The MIECHV Program staff in Escambia County expressed that the strengths of their program are demonstrated by their shared personal experiences with the MIECHV participants and their ability to retain their employees. The staff also found advantages in being able to provide their community with a prevention program inside of their homes and bringing resources directly to them. Along with offering parents tactics and support to help prevent child abuse, having a larger infrastructure (in place before the program began) allowed for access to a multitude of services and pre-established community partnerships.

“This community has a lot of it. I mean, this is a really poor area, and there are a lot of barriers out there. So, we’re working with them so that the bigger view of their life gets better than just subsisting, just existing.” – Administrator

“I think the obvious strength is that it’s prevention rather than intervention.” – Supervisor

“I think being able to be like their cheerleader and a supporter because I think the positive affirmation that they hear from us, they don’t necessarily hear from their significant other or their family or their children or people

in the community.” – Home Visitor

What do you think are the most important outcomes of the program?

Escambia County’s MIECHV Program staff stated that the most important outcome of the program was the ability to empower women, as well as prepping them for a healthy pregnancy, building better bonds between the mother and child, and successfully delaying repeat pregnancies. The Healthy Families Florida staff also observed outcomes such as children in safer environments, positive disciplining practices, mental health services for parents, and the availability of disability services for children in need.

What are some outcomes of the program that would be hard to measure?

Escambia County’s MIECHV Program staff identified themes among participants that were hard to measure, such as self-sufficiency, learning to cope, prioritizing and taking the opportunity to change their lives, lifestyle stabilization, and building a healthy family relationship. The staff also mentioned psychological outcomes, such as breaking the cycle of generational child abuse and neglect.

“One of the hardest things to measure is the psychological benefits to that child.” – Supervisor

“Mental health for the parents, for the mom that’s making sure that they are able – have access whether it’s through our family specialists or through some community agency about mental health to make sure they’re getting those needs met.” – Home Visitor

Phone interviews conducted with Escambia County MIECHV Program participants:

What does the home visiting program mean to you and your family?

Generally, most women voiced thanks for the informational support provided. However, the relationships (i.e., emotional support) that participants formed with their home visitors seemed to mean the most to participants.

“I would describe it as very helpful and it’s a good program when you’re new to being a parent and you don’t really know much. I feel like she’s very helpful. It will help you out a lot. It will teach you a lot of stuff that you really didn’t know or you really wouldn’t have thought of.”

“I would say it’s very helpful. They can involve with you during your pregnancy and after your pregnancy if you choose to do it. I highly recommend it to somebody if they’re pregnant, if I know somebody that’s pregnant I would recommend them to the person I know that’s pregnant.”

“They help set and make goals that are reachable.”

“She’s very understanding and she’s helped me a lot with things that I go through with some personal pointers from herself and her own experiences.”

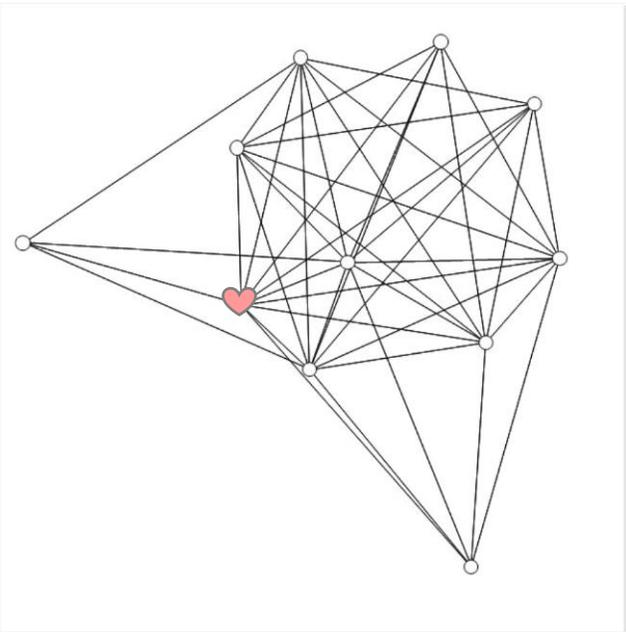
“The program has given me the stability that the baby’s coming and it’s going to be okay.”

PARTNER Tool survey 2014-2015:

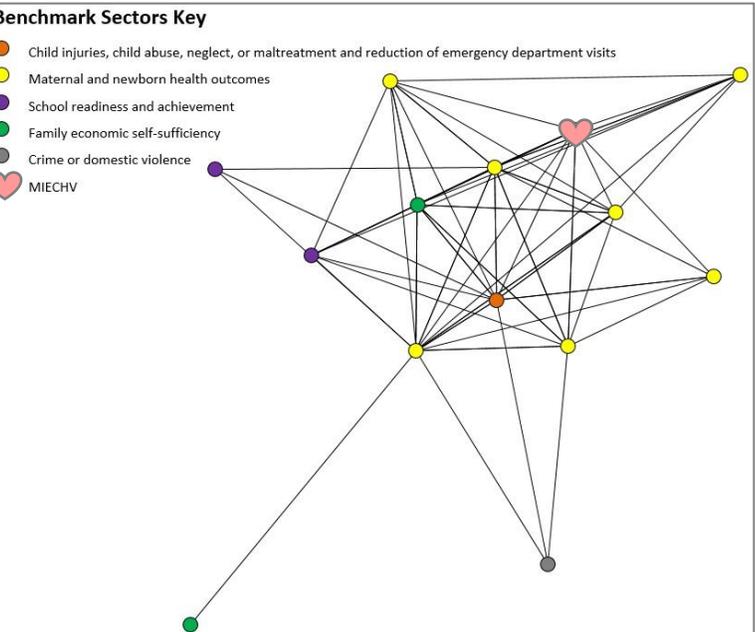
Select the organizations with which you have an established relationship (either formal or informal).

Collaboration among organizations and groups was measured through the Program to Analyze, Record, and Track Networks to Enhance Relationships (PARTNER Tool) survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of 90Works Healthy Families Escambia.

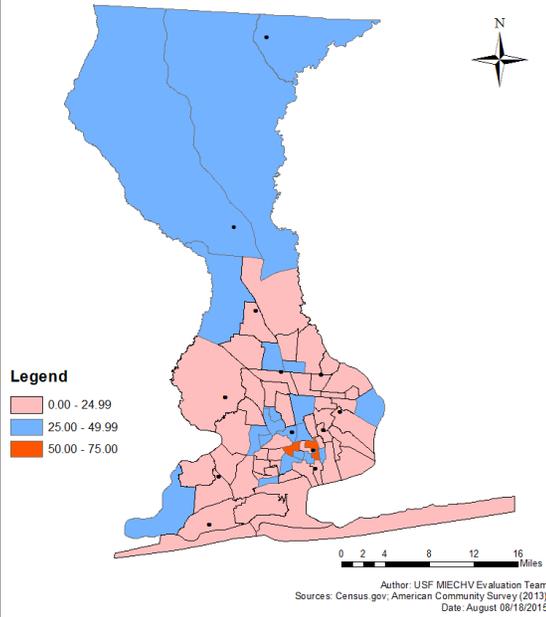
Time I Survey (Spring 2014)
 Number of Participants: 11/11
 Response Rate: 99.3%



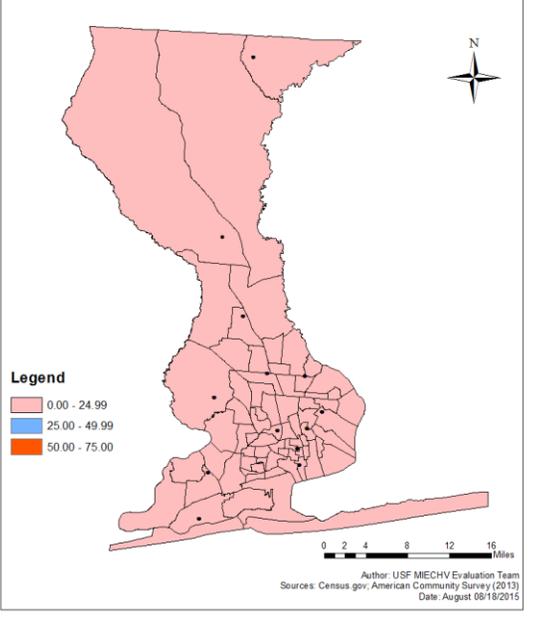
Time II Survey (Summer 2015)
 Number of Participants: 11/14
 Response Rate: 73.5%



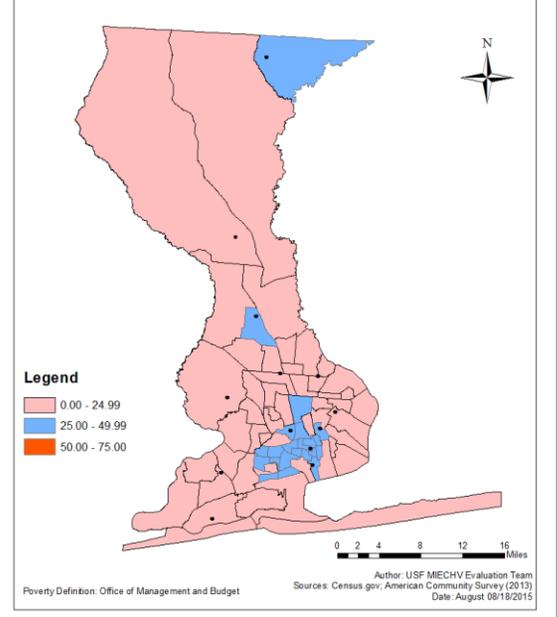
Escambia County Participants Mapped at Zip Code Level to Percentage of Individuals with Less than High School Education at the Census Tract Level



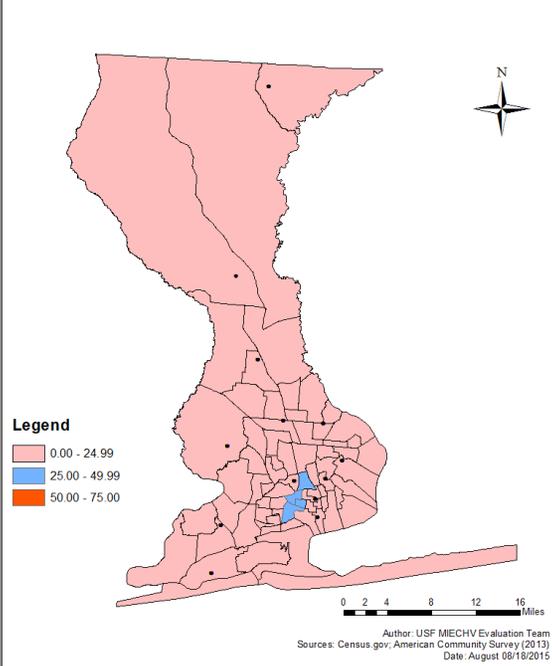
Escambia County Participants Mapped at Zip Code Level to Percentage of Limited English Speaking Households at the Census Tract Level



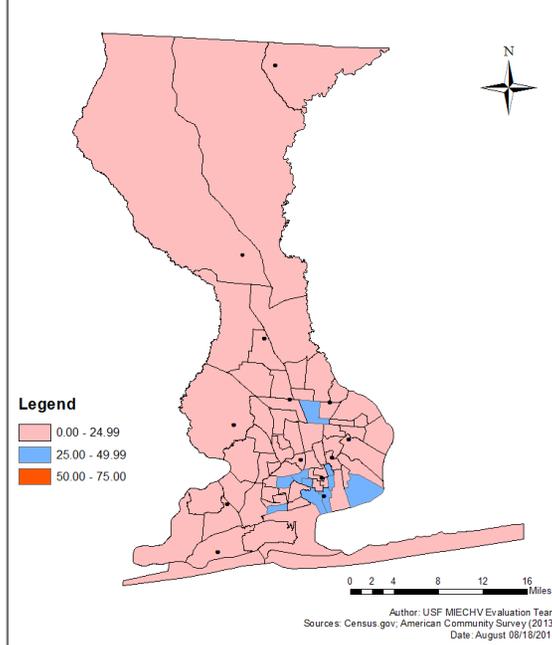
Escambia County Participants Mapped at Zip Code Level to Percentage of Individuals Living in Poverty at the Census Tract Level



Escambia County Participants Mapped at Zip Code Level to Percentage of Unemployment at the Census Tract Level



Escambia County Participants Mapped at Zip Code Level to Percentage of Individuals with No Insurance at the Census Tract Level



MIECHV Evaluation Overview

Hillsborough County



Focus groups and interviews conducted with NFP staff in Hillsborough County:

What do you consider the biggest strength(s) of your program?

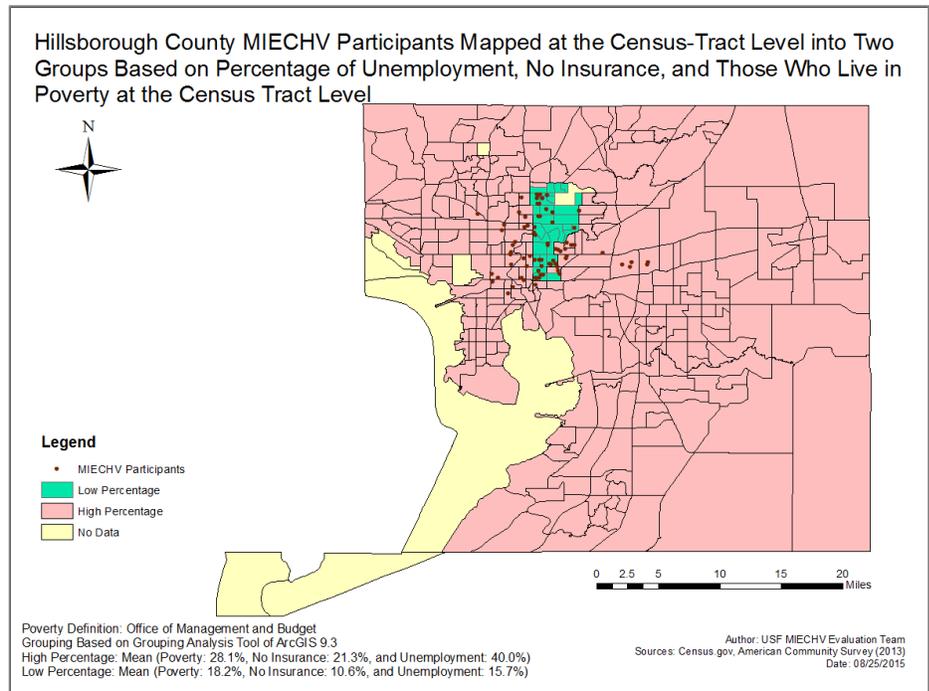
The MIECHV program staff from Hillsborough County expressed that being ingrained in the community, as opposed to in a hospital, was a critical strength of their program. The NFP staff further elaborated on the strength of having an evidence-based program, as well as having powerful community partnerships. Ultimately the NFP staff found it advantageous to have a NFP curriculum that enables nurse home visitors to provide numerous types of support, professional guidance, and a nurturing friendship with the families.

“Wow, biggest strength. It is evidence-based. It has got a proven track record by virtue of the three randomized controlled trials that David Olds conducted.”

“That we can change some women lives, family, and have better outcome with their children.”

“We are their mentors, educators, social support because we can also give some referrals, and we have a liaison within the community.”

“I truly think it’s how strong our community is and with maternal child health issues we, through Healthy Start Coalition, they’ve always chaired the Plan Development Committee, you know, our partnership committee, and we just have real strong community partners who’ve come to the table.”



What do you think are the most important outcomes of the program?

Hillsborough County’s MIECHV program staff stated a number of important outcomes of their program including the ability to empower women, teach self-sufficiency, and encourage responsible parenting practices. The staff also voiced how getting mothers ready for a healthy pregnancy was crucial, being that the goals of the program include helping women reach full-term birth and decreasing infant mortality rates. Other noteworthy outcomes for mothers enrolled in the MIECHV program included building stronger bonds between the mother and her baby and strengthening parenting skills, the latter of which can help with stress reduction.

“I think the self-sufficiency part, I really compare it to my family and our parents being born in a depression and all the programs that the government had to really improve the lives of so many Americans.”

“...to teach them and simulate how to motivate a child to learn because their brains are growing.”

“I think your outcome data would be clearer if you were also looking at the structure of the family.”

What are some outcomes of the program that would be hard to measure?

Hillsborough County’s MIECHV program staff identified themes among participants that were hard to measure, such as quantifying the desire of their clients to become self-sufficient. The staff also mentioned how it would be difficult to measure what impact the Nurse-Family Partnership program has on positive pregnancy outcomes.

“Self-sufficiency, a Healthy baby, a bonded child that feels secure for future relationships.”

Phone interviews conducted with Hillsborough County MIECHV program participants:

What does the home visiting program mean to you and your family?

Generally, most women voiced thanks for the informational support provided. However, the relationships (i.e., emotional support) that participants formed with their nurse home visitors seemed to mean the most.

"I would say it was very, very informative for me. Especially being a first time mom, not knowing what to expect."

"Honestly, it's one of those things where you know that you're not alone, and you always have somebody there to look out for you and help you in any situations."

"It means to support us and help choose better decisions in life and think positive about things."

PARTNER Tool survey 2014-2015 administered with Hillsborough MIECHV collaborators:

Select the organizations with which you have an established relationship (either formal or informal).

Collaboration among organizations and groups was measured through the **Program to Analyze, Record, and Track Networks to Enhance Relationships** (PARTNER Tool) survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of Nurse-Family Partnership in Hillsborough County.

Time I Survey (Summer 2014)

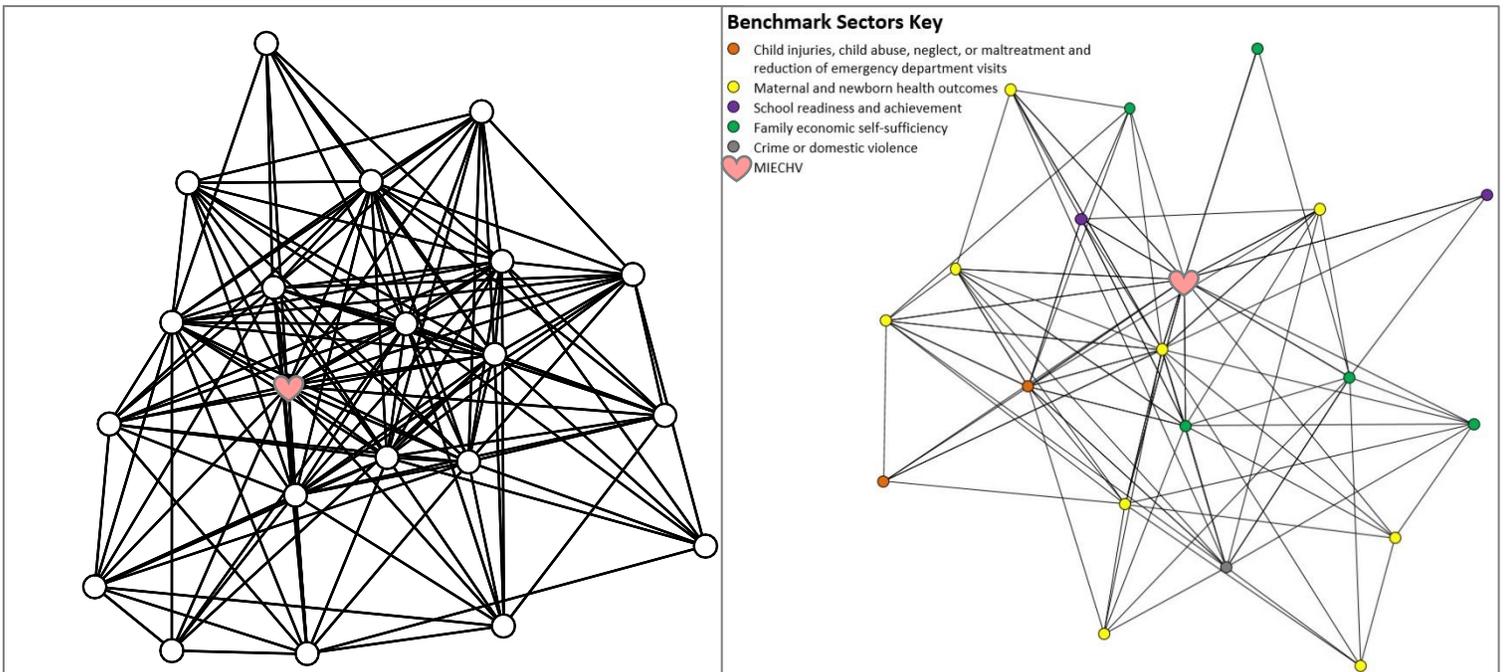
Number of Participants: 20/21

Response Rate: 89.5%

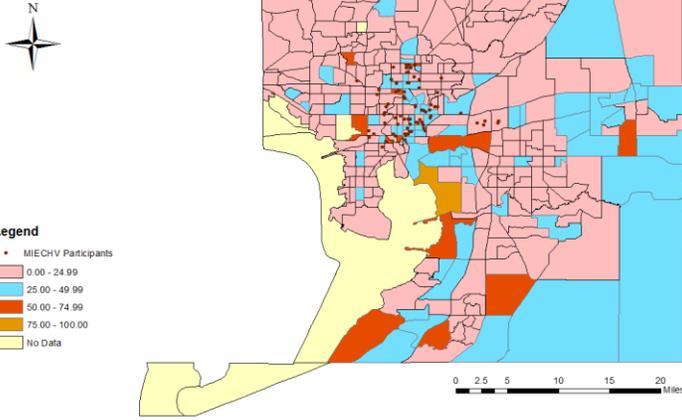
Time II Survey (Summer 2015)

Number of Participants: 19/20

Response Rate: 83.0%

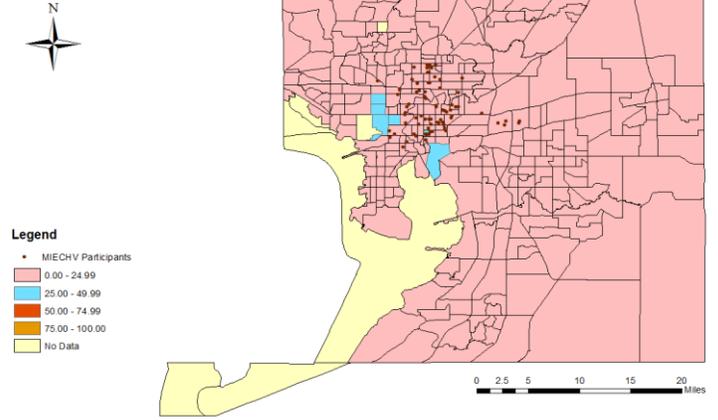


Hillsborough County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



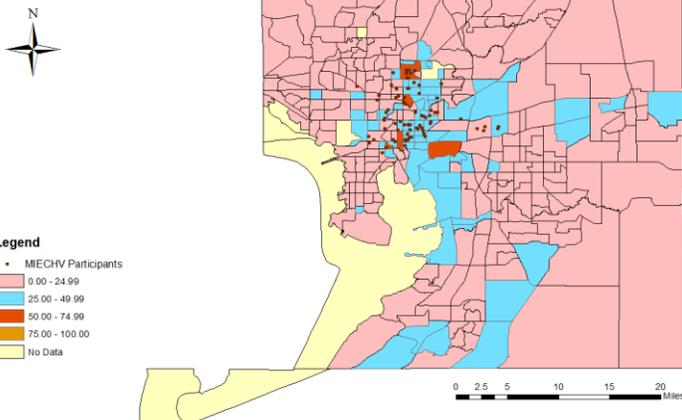
Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 08/25/2015

Hillsborough County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 08/25/2015

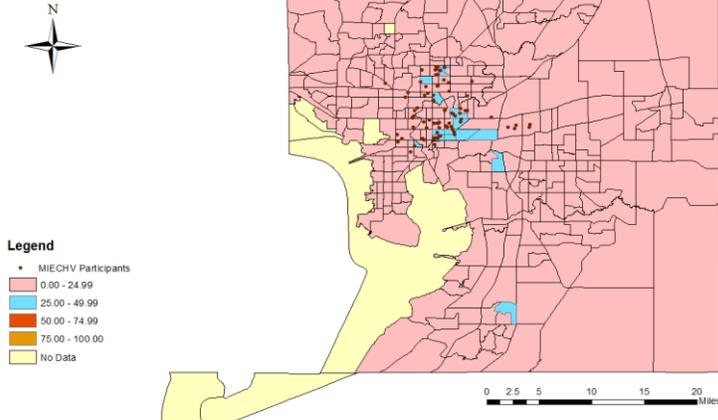
Hillsborough County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 08/25/2015

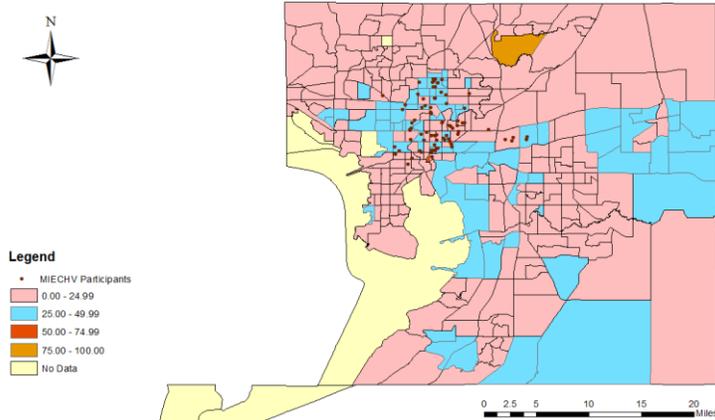
Poverty Definition: Office of Management and Budget

Hillsborough County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Unemployed Individuals at the Census Tract Level



Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 08/25/2015

Hillsborough County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 08/25/2015

MIECHV Evaluation Overview

Manatee County



Focus groups and interviews conducted with PAT Program staff in Manatee County:

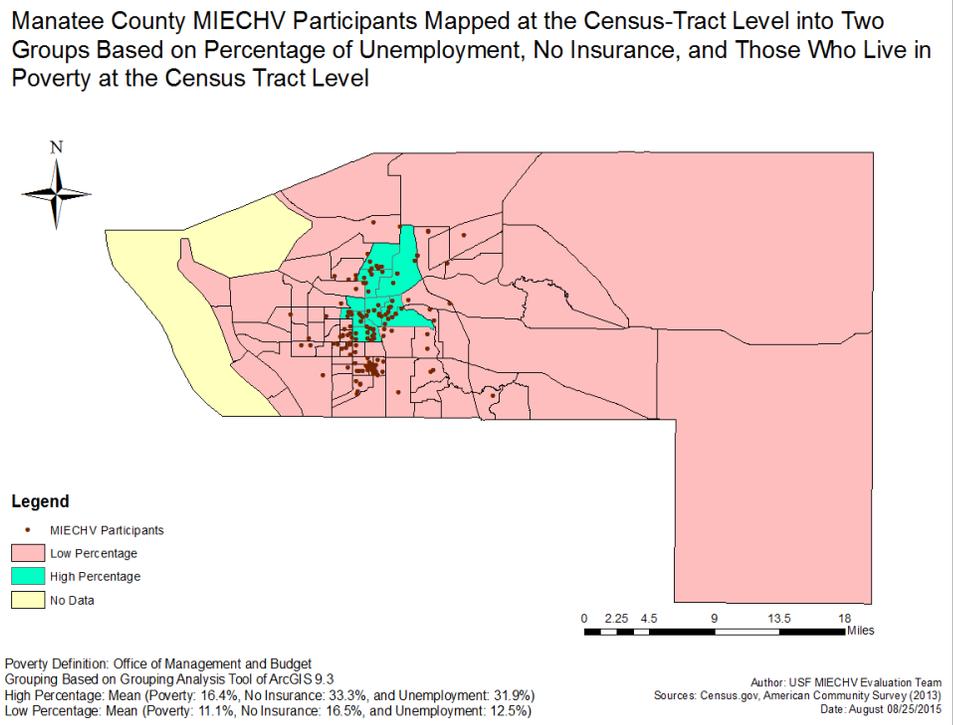
What do you consider the biggest strength(s) of your program?

The MIECHV Program staff in Manatee County expressed that their well-educated, bilingual, and experienced parent educators were a critical strength of their program. The staff found further advantages in the skillset of the parent educators in directly providing their PAT Program participants with necessary resources. Said resources are what the PAT Program emphasized as a final strength, specifically how their program represents an avenue to access a vast amount of available resources in the community that their clients may not have otherwise been aware of.

“The PAT program funded by MIECHV really filled in that gap in the population that we could not serve.”

“Definitely my staff. They have a lot of experience. Even though we only require a bachelor level, we have four masters, three bachelors.”

“I think the resources is going to be in this one the biggest thing with this program; except that the people look for more than anything is resources where they can get food, where they can get clothing, homes, housing assistance, things like that.”



What do you think are the most important outcomes of the program?

Manatee County's MIECHV Program staff stated a number of important outcomes of the program including learning self-sufficiency, independence, and self-empowerment. They also reported changes in lifestyle and household environment, early intervention in developmental delays, and school readiness. Other crucial outcomes of the program involved building stronger bonds between the mother and her baby, along with the mothers learning how to go out and get information and different forms of support on their own.

“Improved communication among agencies and organizations interested in the health...”

What are some outcomes of the program that would be hard to measure?

The Manatee County MIECHV Program staff identified themes among participants that were difficult to measure, such as participant and community integration, mother and baby bonding, and life skill progressions. The staff also mentioned how it would be difficult to quantify outcomes that would not be apparent until after the two years of home visiting has come to an end.

“Some of the life skills progression things, some things that are not two years and – some things are never going to be achievable for some of our parents. They're undocumented, they don't speak English...”

“Taking the information that was given to them and them making the changes in their lifestyles and their household because we gave them that information and trying to make that change for their child or for their home.”

Phone interviews conducted with Manatee County MIECHV Program participants:

What does the home visiting program mean to you and your family?

Manatee County MIECHV Program participants noted that some of them were first time parents and having this program and support was absolutely essential to surviving. They also mentioned the importance of having the support for their other children in the household, helping with assimilation into their new environments, learning to interact properly and positively with their children, learning new things about parenting that have changed since having earlier children, and even being able to have a place to live and the resources necessary to take care of their families.

"A very essential and important help."

"I don't even want to imagine what we would be without it, like we might be homeless right now."

"I see it as the future of my daughters."

"I think it's very good because sometimes when you're not from here, you need help to know how to do things here. You need someone to explain things to you."

PARTNER Tool survey 2014-2015 administered with Manatee County PAT Program collaborators:

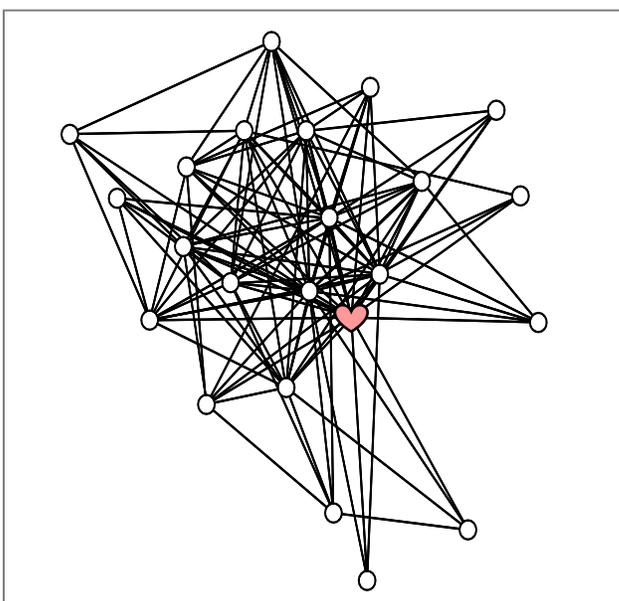
Select the organizations with which you have an established relationship (either formal or informal).

Collaboration among organizations and groups was measured through the **Program to Analyze, Record, and Track Networks to Enhance Relationships** (PARTNER Tool) survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of Manatee Community Action Agency's Parents as Teachers Program.

Time I Survey (Summer 2014)

Number of Participants: 17/23

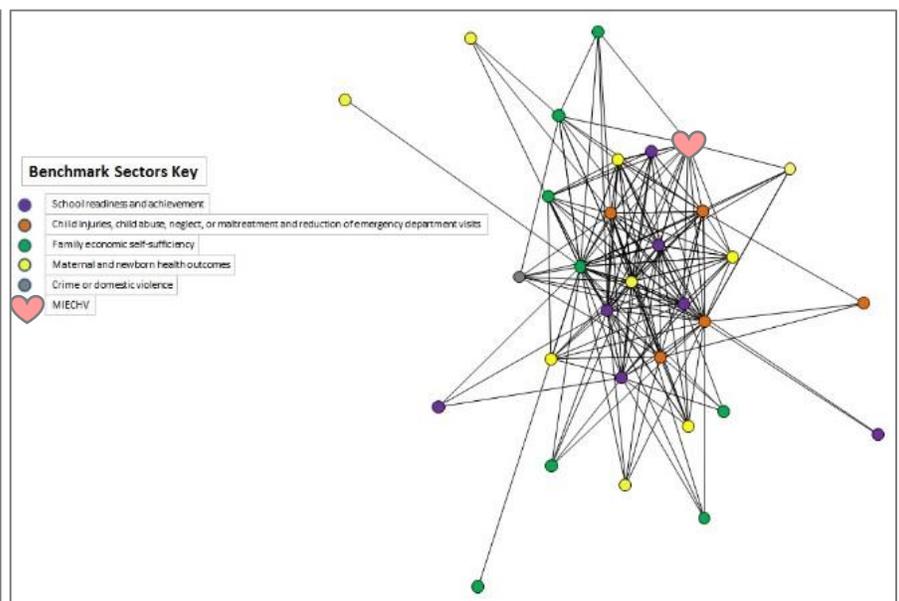
Response Rate: 65.5%



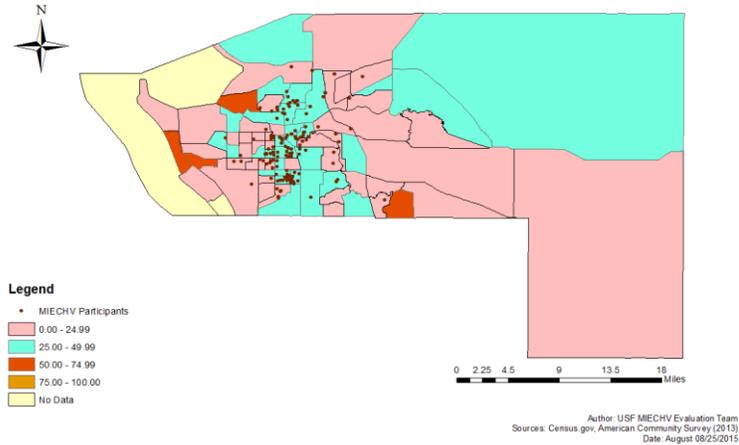
Time II Survey (Summer 2015)

Number of Participants: 20/31

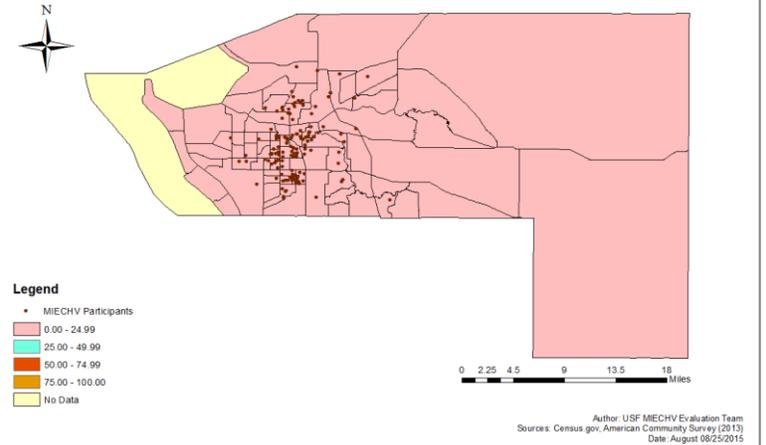
Response Rate: 50.2%



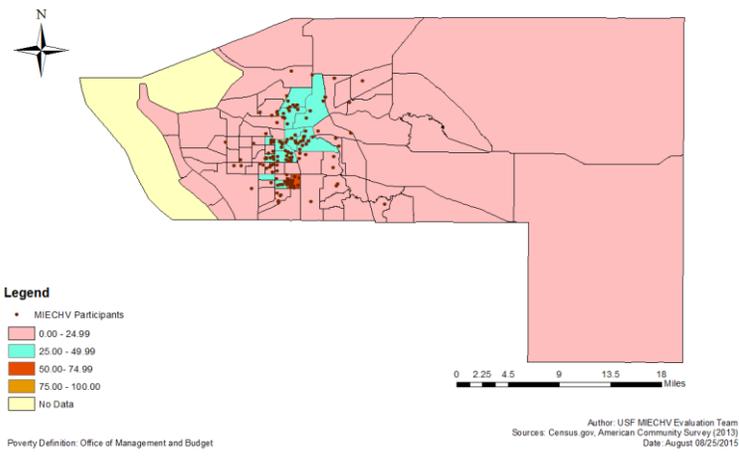
Manatee County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



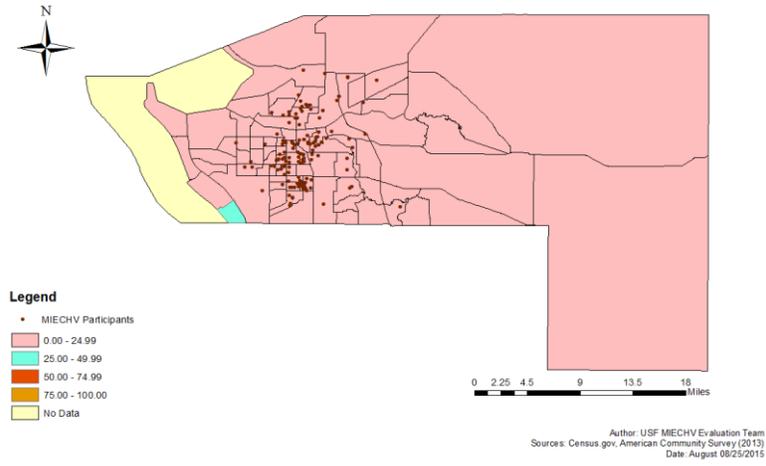
Manatee County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



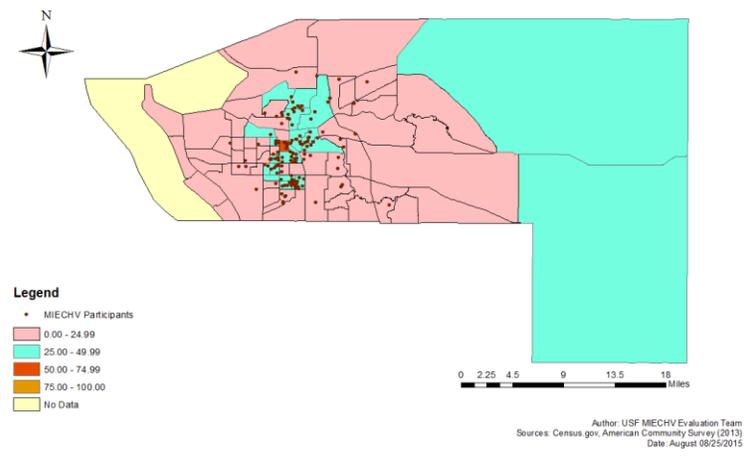
Manatee County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



Manatee County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Unemployed Individuals at the Census Tract Level



Manatee County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



MIECHV Evaluation Overview

Miami-Dade County



Focus groups and interviews conducted with NFPAMD staff:

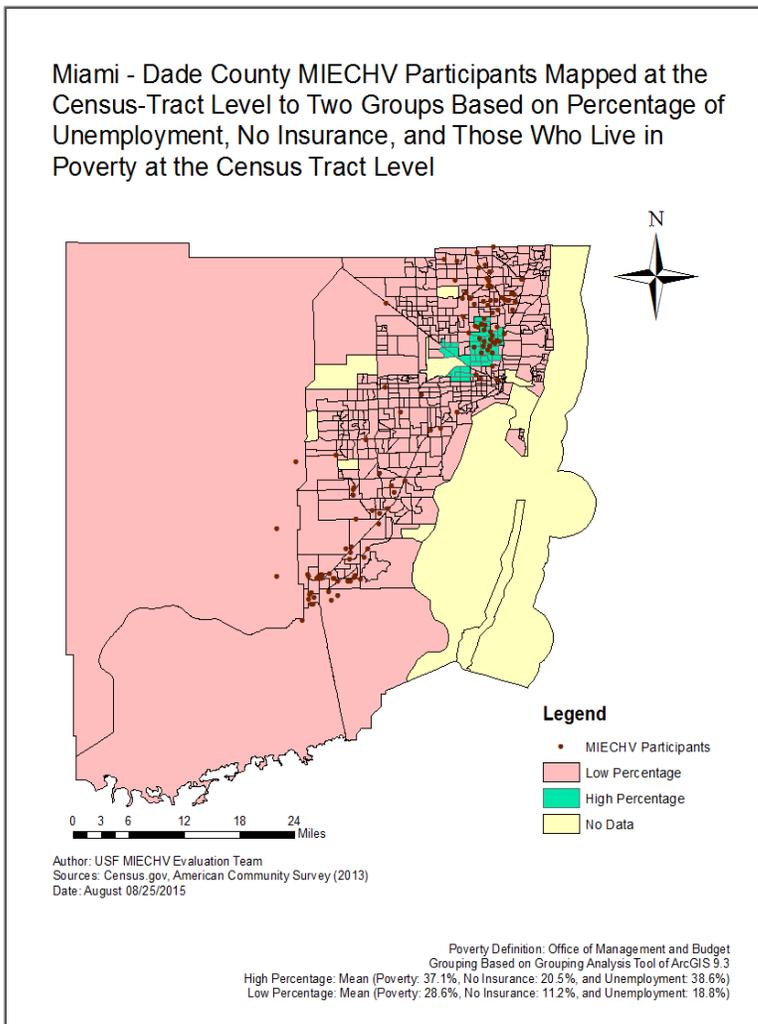
What do you consider the biggest strength(s) of your program?

The MIECHV Program staff in Miami-Dade County were asked to identify the biggest strengths of their program. They noted the length of the program, as well as the strong internal communication and support with colleagues as powerful aspects not only for their clients but for their working environment. Along with being able to hold meetings and share information with each other, the staff found additional strength in the manner in which their team collaborates together and their ability to implement the Nurse-Family Partnership model.

"I think the fact that our RNs are part of Federally Qualified Health Centers, and therefore are linked to OB practices, makes a huge difference."

"I think we have like a really strong bond between all of us. Like the nurses that are there and myself, we communicate really well."

"...I would say the continuity of seeing that person every week or every other week, and see how they grow."



What do you think are the most important outcomes of the program?

Miami-Dade County's MIECHV Program staff stated that the most important outcomes of the program included the participants and home visitors accomplishing the goals that were made at the first home visits and the program's positive impact on child development. The NFPAMD staff also elaborated on critical outcomes, such as improvement in mother-and-baby interactions and the self-efficacy of participants.

"That I can accomplish what I promised them the first day that I saw them."

What are some outcomes of the program that would be hard to measure?

The Miami-Dade County's MIECHV Program staff were asked to think of any intangible benefits received as a result of the program. Staff members mentioned how it would be difficult to quantify the participants' feelings towards their home visitor, emphasizing the strength of the bond formed between the two parties.

"I guess how some of the mothers might feel about their relationships with their nurse home visitor, sometimes that is subjective rather than objective."

Phone interviews conducted with Miami-Dade County MIECHV Program participants:

What does the home visiting program mean to you and your family?

In general, NFPAMD participants expressed their appreciation and affinity for the Miami-Dade MIECHV Program. They also stated that they valued being able to gain knowledge from the visits, as well as have support and information provided to them.

"It means a lot. It means a lot and still does due to the fact of, you know, having a baby and the support, because I feel like have more support not just from my family but with the program and the home worker herself."

"I would say it means support and just knowledge. It's a lot of things that I didn't know since this is my first child, so very knowledgeable."

"That's a huge help."

PARTNER Tool survey 2014-2015 administered with NFPAMD collaborators:

Select the organizations with which you have an established relationship (either formal or informal).

Collaboration among organizations and groups was measured through the **Program to Analyze, Record, and Track Networks to Enhance Relationships** (PARTNER Tool) survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of NFPAMD.

Time I Survey (Summer 2014)

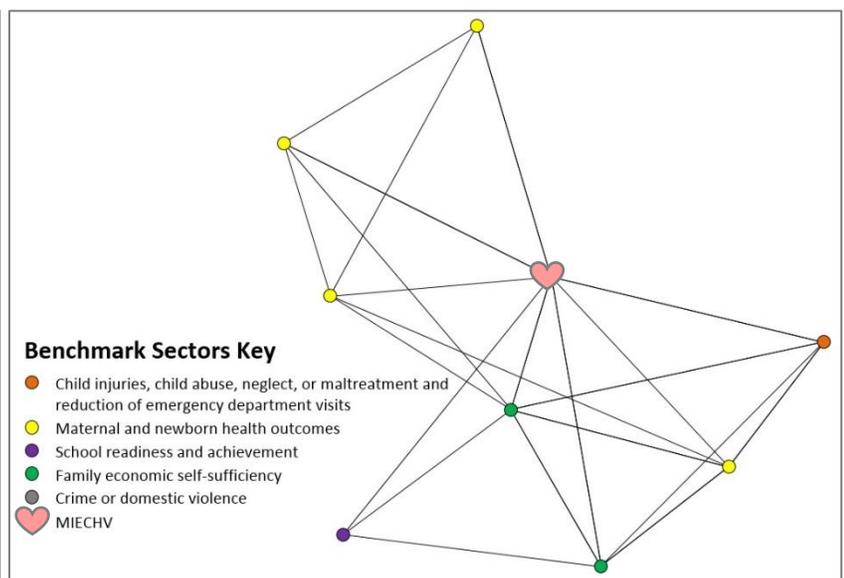
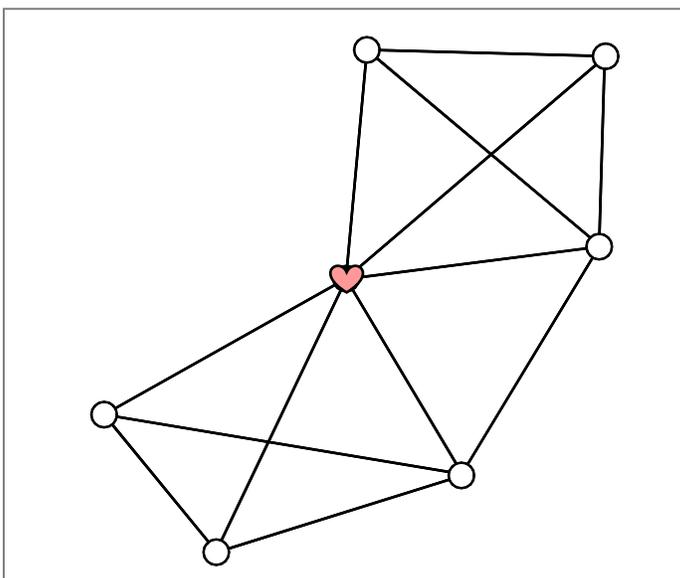
Number of Participants: 6/7

Response Rate: 85.7%

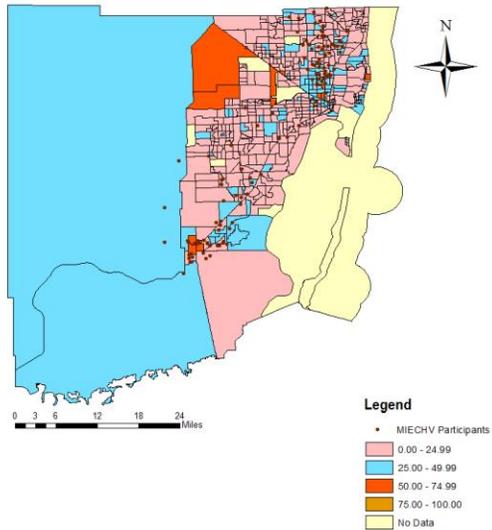
Time II Survey (Summer 2015)

Number of Participants: 8/9

Response Rate: 86.4%

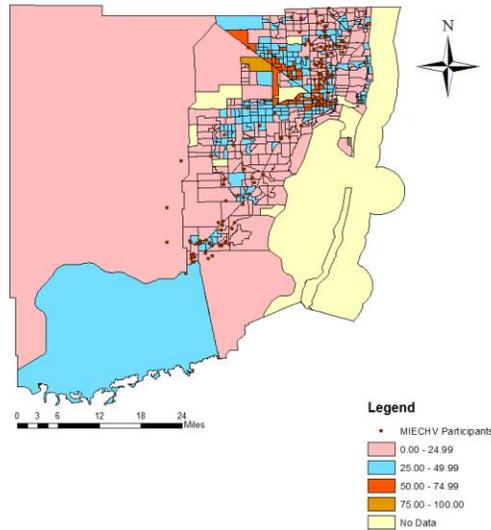


Miami -Dade County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



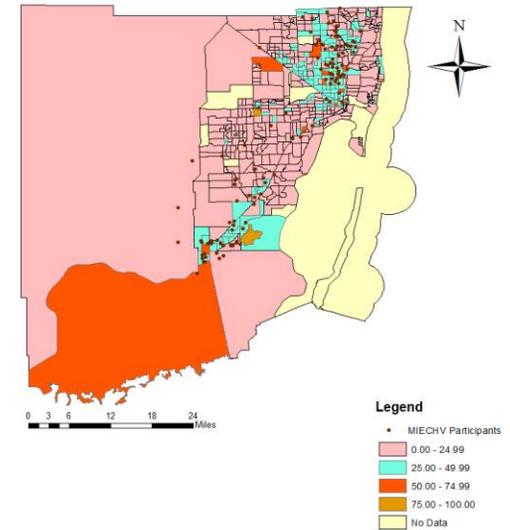
Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: August 08/25/2015

Miami - Dade MIECHV Participants Mapped at the Census Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: August 08/25/2015

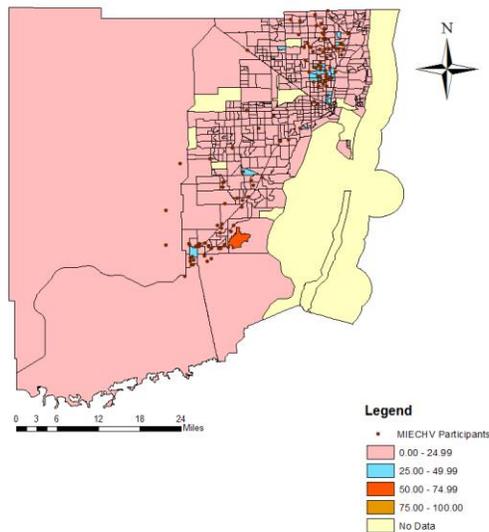
Miami-Dade County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: August 08/25/2015

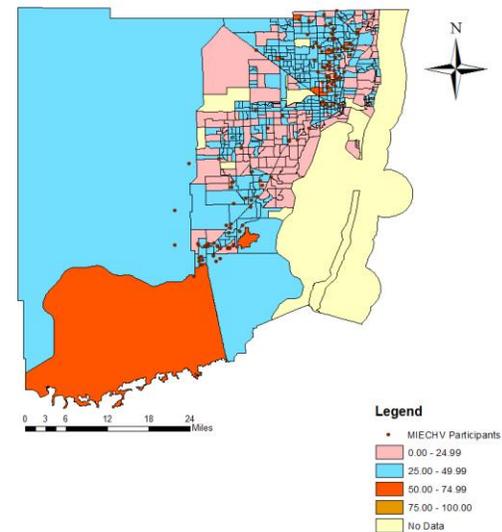
Poverty Definition: Office of Management and Budget

Miami - Dade County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Unemployed Individuals at the Census Tract Level



Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: August 08/25/2015

Miami -Dade County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: August 08/25/2015

MIECHV Evaluation Overview

North Central Florida Counties



Focus groups and interviews conducted with PAT program staff in North Central Florida Counties:

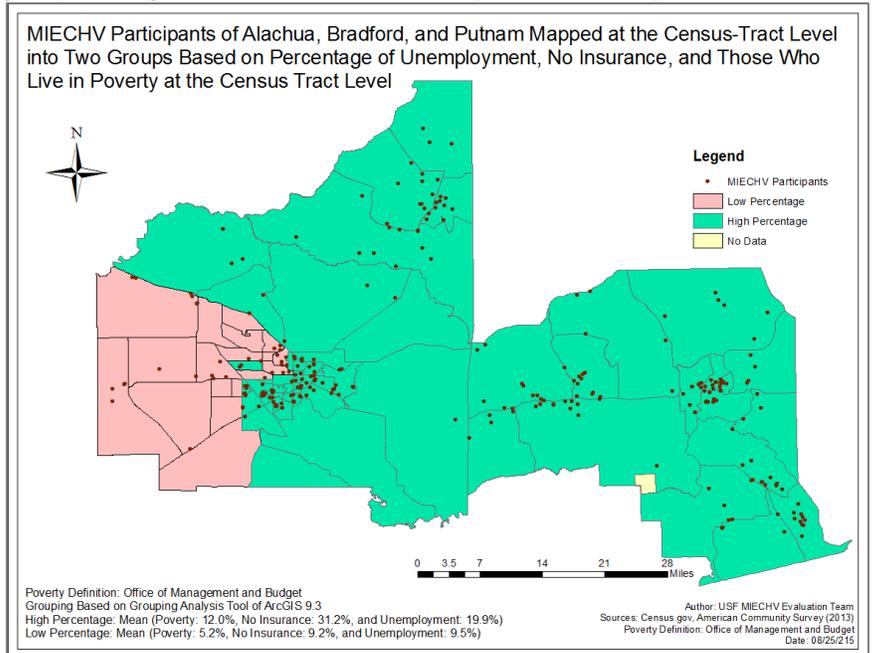
What do you consider the biggest strength(s) of your program?

The MIECHV program staff from three North Central Florida Counties expressed that they encompassed the ability to provide services to families who live in rural counties where transportation is limited and need is high. The PAT staff talked about their strengths of implementing an evidence-based program, building comfortable and more receptive relationships with their clients in their homes, and being able to dedicate as much time to a family as needed. Additionally, they found further advantages from the previous implementation of Healthy Start in the community and the connections that made it smoother for the MIECHV program to be implemented. Lastly, the PAT staff elaborated on the program's community- and family-based focus, as well as its ability for client engagement and retention.

"I think for me the greatest thing that it offers is us being able to do that evidence-based program, and being able – knowing that if we do it the way they say we should do it, that we should make a difference."

"I would say the biggest strength – is that it's community-based and that it is family-focused."

"Just the building a rapport and building the trust so that they will disclose information they might not otherwise do, I think it's really a big strength because you're there and you're talking."



What do you think are the most important outcomes of the program?

North Central Florida Counties' MIECHV program staff stated that the most important outcome of their program was giving their clients the opportunity to change their lives around. Other crucial outcomes as a result of program implementation were improvements in reaching developmental milestones, school readiness, as well as receiving healthcare. Of additional importance, the PAT program staff reported children removed from abusive situations and the cessation of repeat teen births. Also, the staff expanded on how their program contributes to the empowerment of women, as well as getting mothers ready for a healthy pregnancy and helping them build stronger bonds between the mother and her baby. Lastly, the staff elaborated on the prevention of child abuse and injuries and families entering into the welfare system. The parent educators help the families to strengthen child engagement, learn family planning practices, as well as attain self-sufficiency, independence, and self-worth.

"They have so many negatives and people saying, 'You can't. You can't. You can't.' To have somebody come in and say, 'You can,' that builds their self-esteem."

"If the right person is meeting with them for the first visit and they connect with them, it could change their life forever."

"I mean, I think just like how much they learned or how much they've changed."

What are some outcomes of the program that would be hard to measure?

North Central Florida Counties' MIECHV program staff identified themes among participants that were intangible, such as measuring how they become self-efficient, learn to cope, prioritize, and take the opportunity to change their lives. The staff also mentioned that another immeasurable benefit of the PAT program was how it allowed participants to stabilize their lifestyle, which better enables them to build a healthy family relationship and decrease stress levels moving forward.

"Decreasing the stress..."

"The level of support that they got."

Phone interviews conducted with Alachua County MIECHV program participants:

What does the home visiting program mean to you and your family?

The North Central Florida MIECHV participants noted the importance of being able to have information about the different ways to interact with their children. They also mentioned the positive impact of the PAT program in providing the personal aspect of the home visits and close relationships with their parent educators, as well as getting other family members involved and being able to build a connection with their babies. Lastly, the MIECHV participants also stated that some of them were first time moms and having this program, gaining knowledge about their child's development, and receiving extra support or any support at all was essential to surviving.

"I like that they're very personal, like she gets to know our family and comes in and I can just talk to her and I can say whatever, a kid's name and she's not like, 'Oh, who are you?'"

"Extra support. Not like money support but extra moral support and maybe – I don't know a better word to say it, but like knowledge support."

"Like I told the one who comes here also, I said, 'I'm not going to let you all go for nothing in this world. I'm going to stick with you all for the rest of my life. I will stick with you all throughout the rest of my life.'"

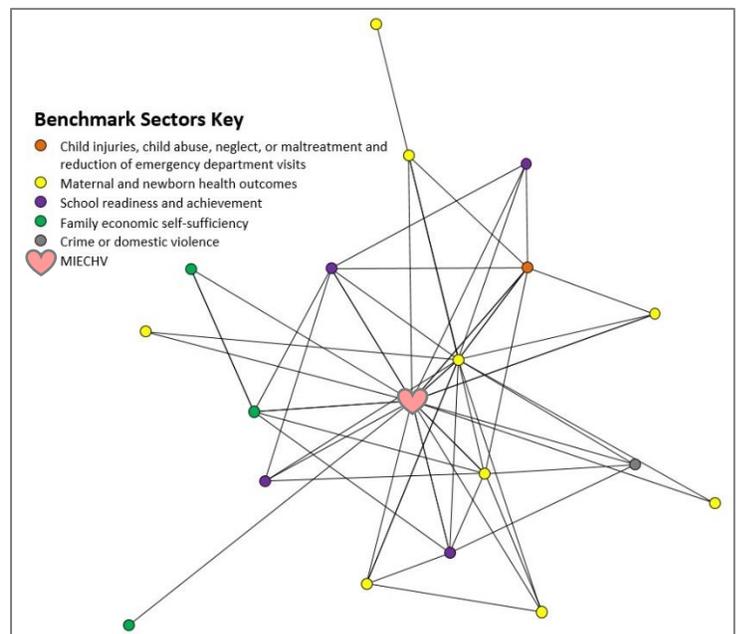
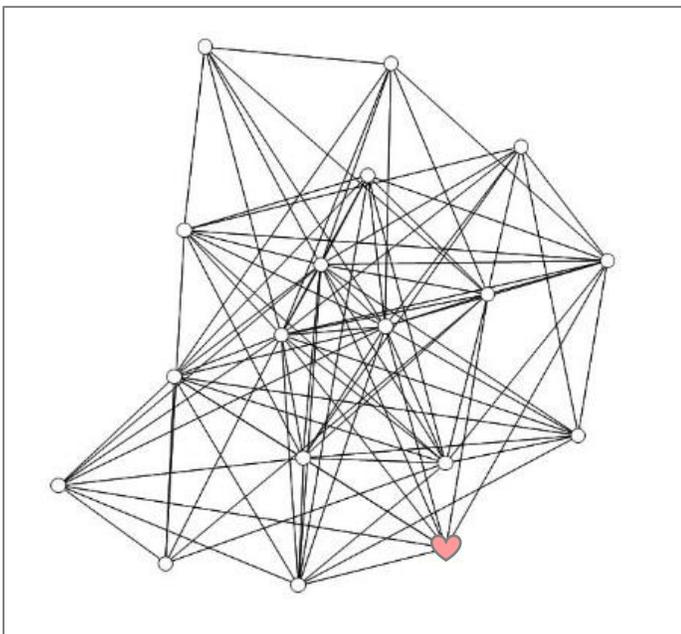
PARTNER Tool survey 2014-2015 administered with Alachua County MIECHV collaborators:

Select the organizations with which you have an established relationship (either formal or informal).

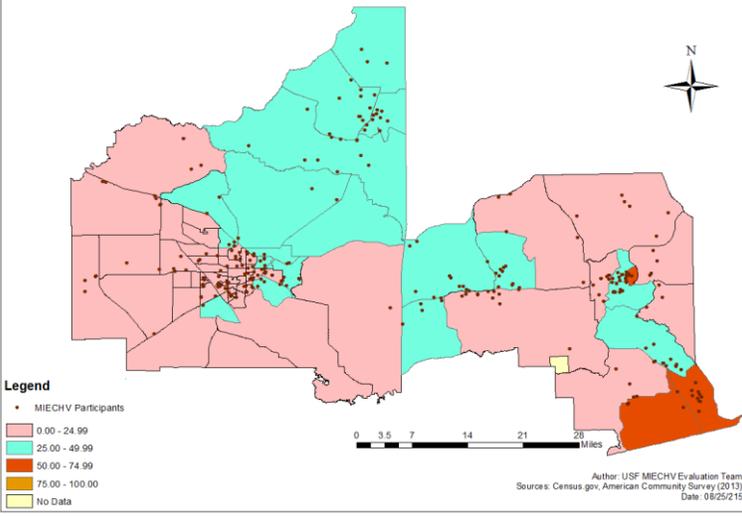
Collaboration among organizations and groups was measured through the **Program to Analyze, Record, and Track Networks to Enhance Relationships (PARTNER Tool)** survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of Parents as Teachers in Alachua County.

Time I Survey (Spring 2014)
Number of Participants: 17/18
Response Rate: 84.9%

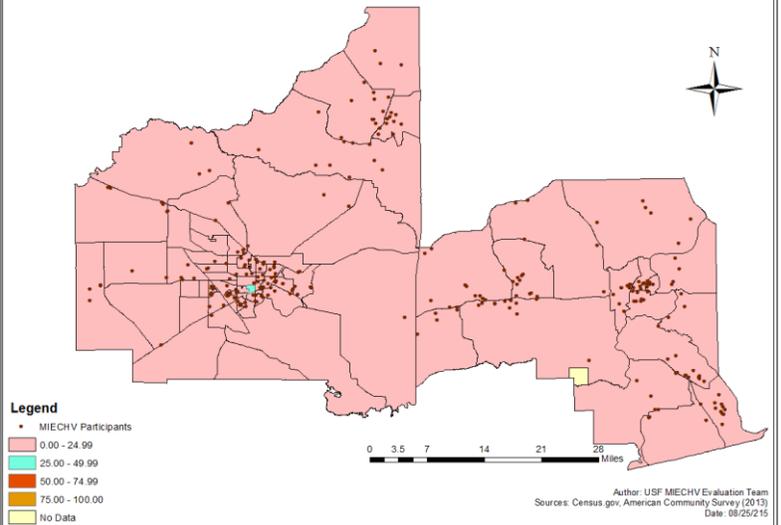
Time II Survey (Summer 2015)
Number of Participants: 17/23
Response Rate: 67.2%



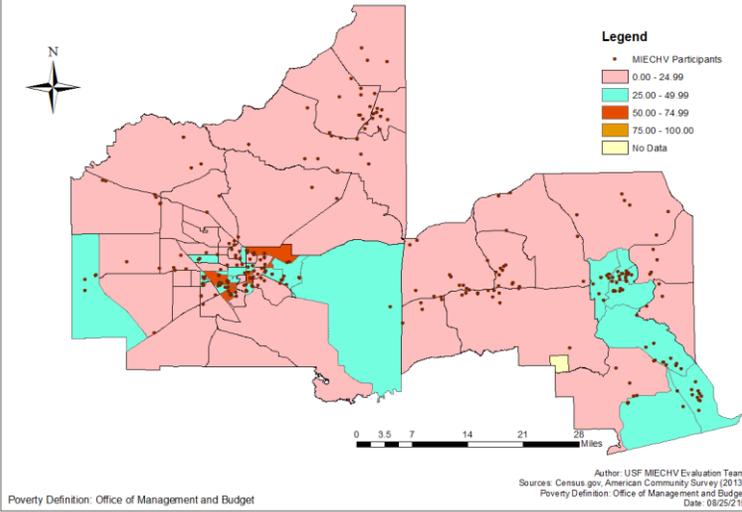
MIECHV Participants of Alachua, Bradford, and Putnam Mapped at the Census-Tract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



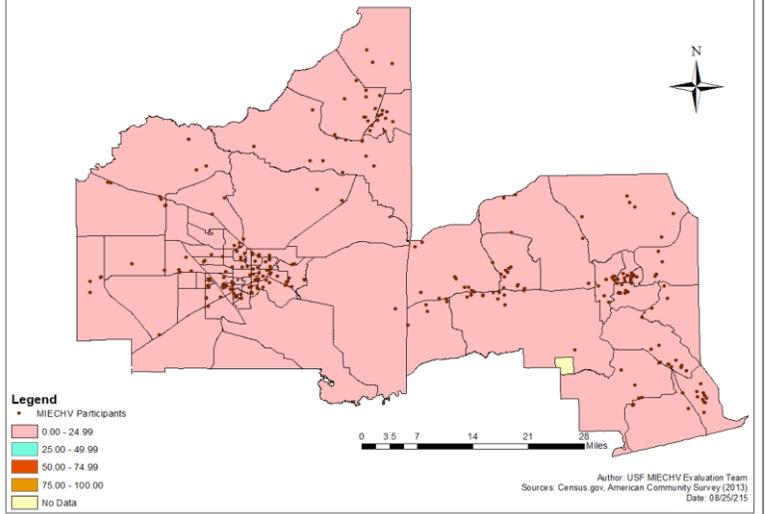
MIECHV Participants of Alachua, Bradford, and Putnam Mapped at the Census-Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



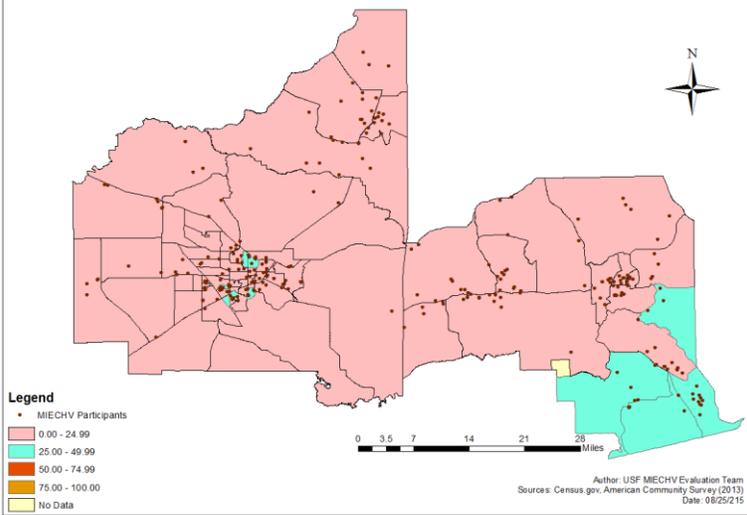
MIECHV Participants of Alachua, Bradford, and Putnam Mapped at the Census-Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



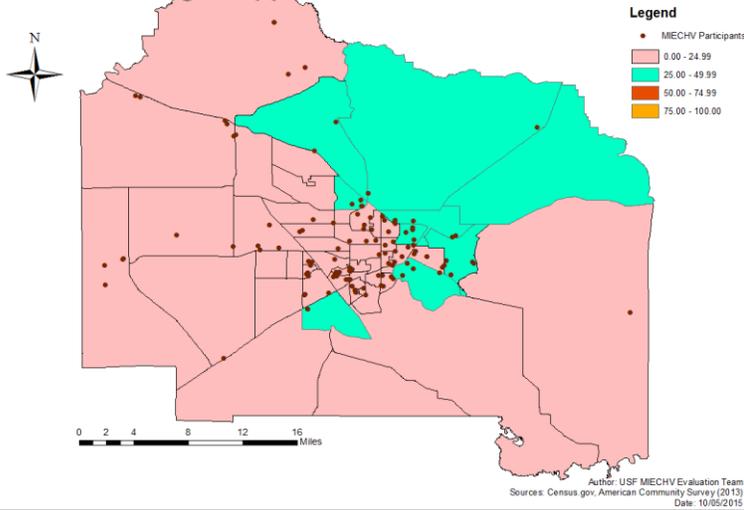
MIECHV Participants of Alachua, Bradford, and Putnam Mapped at the Census-Tract Level to Percentage of Unemployed Individuals at the Census Tract Level



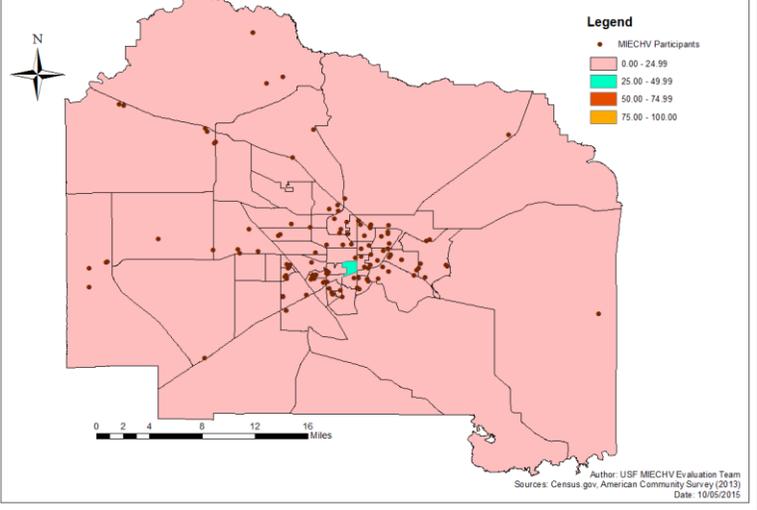
MIECHV Participants of Alachua, Bradford, and Putnam Mapped at the Census-Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



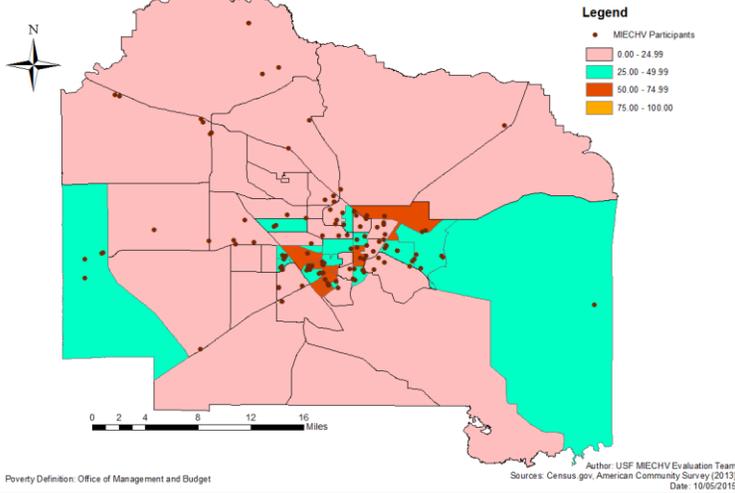
MIECHV Participants of Alachua County Mapped at the Census-Tract Level to Percentage of Individuals With Less than High School Education at the Census Tract Level



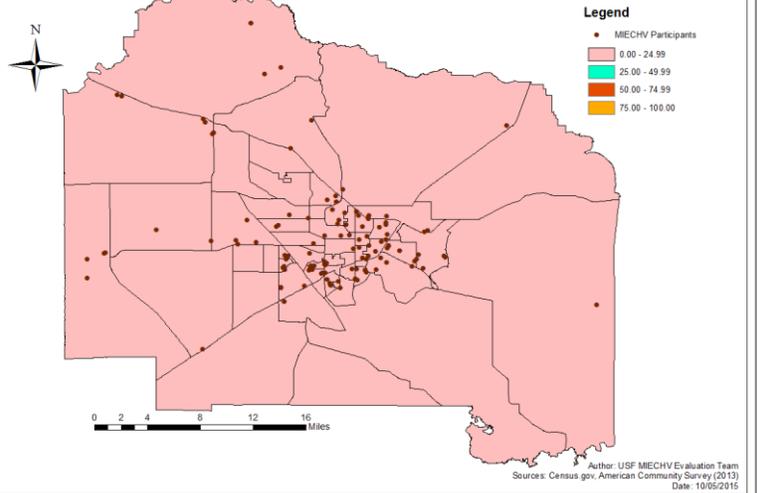
Alachua County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



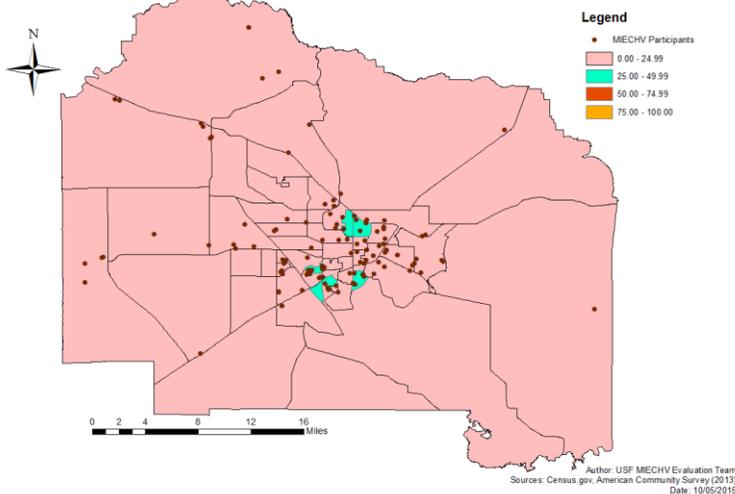
Alachua County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



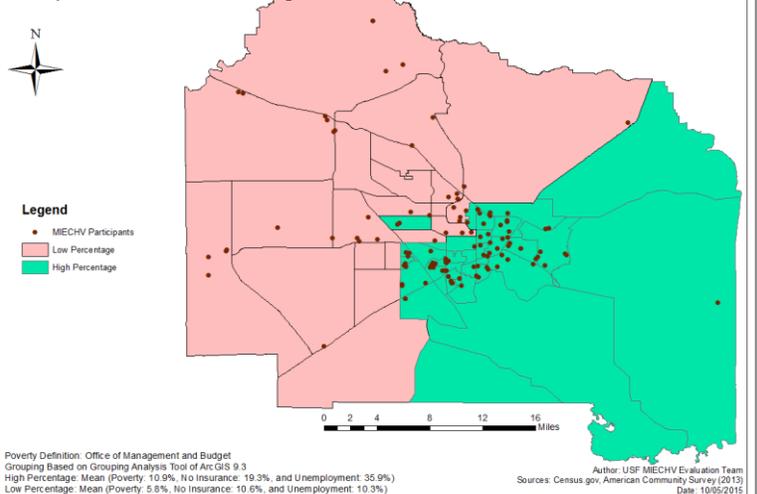
Alachua County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Unemployed Individuals at the Census Tract Level



Alachua County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



Alachua County MIECHV Participants Mapped at the Census-Tract Level into Two Groups Based on Percentage of Unemployment, No Insurance, and Those Who Live in Poverty at the Census Tract Level



MIECHV Evaluation Overview

Orange County



Focus groups and interviews conducted with HFF program staff in Orange County:

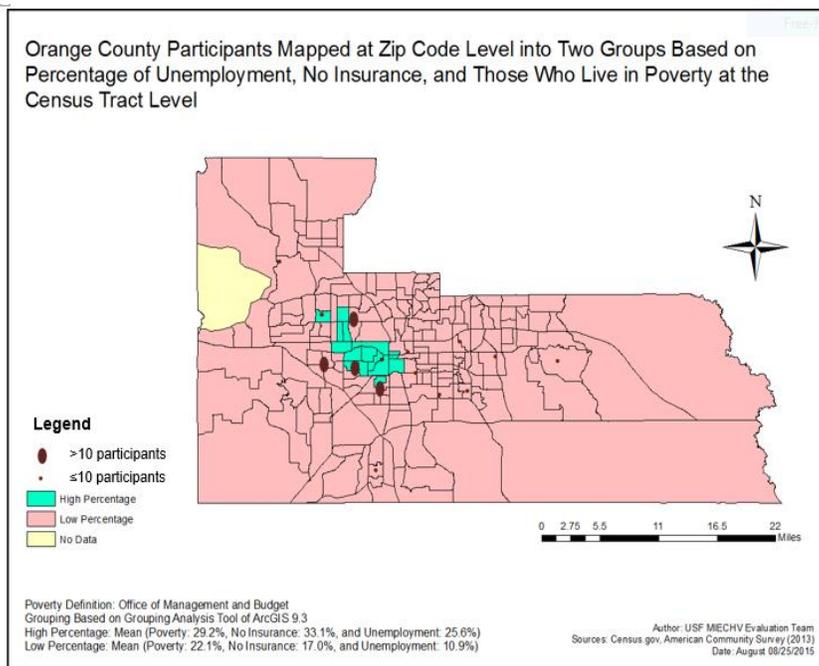
What do you consider the biggest strength(s) of your program?

The MIECHV program staff from Orange County expressed that the longevity of the program, being that their home visitors are in the clients' homes from pregnancy until the child is five years old, was a critical strength of their program. The staff further emphasized how the HFF home visitors minimize their families' crisis situations and how the program influences the prevention of child abuse and neglect, both of which are tremendously beneficial. Another advantage of the program discussed was being able to cross cultural lines, helping the families see a new perspective to parenting, and linking families to community resources. A crucial aspect of the HFF program is the guidance of clients into becoming self-sufficient and empowering them to accomplish their goals, visions, and dreams. The HFF staff elaborated on how the program is not only focused on helping mothers but also on helping participant fathers improve their relationships with their children. The HFF staff also expressed appreciation for the opportunity to attend professional development and training sessions, as well as for being among a good team environment that cares about the community. Lastly, the staff applauded how HFF implements MIECHV's strength-based model and how specialists in the program can work directly with the families instead of having to refer them to other agencies.

"I would say that it's the home visitors themselves, and that there are frequent face-to-face support of families that have lots of crisis and drama and need in their lives, and navigating the limited resources that there are."

"Linking families with community resources, self-sufficiency, help them become empowered to accomplish their goals and dreams and their vision come to reality."

"I think one of the biggest strengths of the program is that – is the way that everybody who works with Healthy Families kind of work together and collaborates together."



What do you think are the most important outcomes of the program?

Orange County's MIECHV program staff stated a number of important outcomes of their program including increased prenatal care utilization and immunizations, along with improvements in home safety. Another crucial outcome as a result of the program was reducing child maltreatment in their clients' homes; consequently, the betterment of family health and positive parent-and-child interactions. Of additional importance was the reportedly high completion rate regarding their clients' ages and stages questionnaires. Ultimately, the staff discussed how home visitors help their clients achieve a level of self-sufficiency that may not have been reached otherwise.

"Well, the family – well they call it now family goal plan – is a good outcome on the health of the family because on some case they may not have thought about setting goals and things like that."

"...learning what kind of choices they've made in their past that have led them to this place, and how to think about things in a different way, in a healthy way and make healthy, positive changes so that they can be more independent in fixing things for themselves."

"I think independence is a major outcome of the program."

What are some outcomes of the program that would be hard to measure?

Orange County's MIECHV program staff identified themes among participants that were intangible, such as measuring the clients' coping and prioritization process, as well as measuring the families' ability to become stable. The staff mentioned that another immeasurable benefit of the HFF program would be to quantify the amount of effort that the home visitors put into each visit.

"I would say it is them becoming stable, and them learning how to cope and prioritize."

"I think what's difficult to measure is what – actually what we do out in the field."

Phone interviews conducted with Orange County MIECHV program participants:

What does the home visiting program mean to you and your family?

The Orange County MIECHV participants noted that the HFF program has given them useful information and taught them to reduce their stress levels. The program has enabled them to understand that taking time for themselves is crucial to being a better parent. They also mentioned the positive impact of the HFF program in checking-up on them, supporting the interaction with older children, and having someone there for them when they may not have anybody else. Lastly, the MIECHV participants stated that having the home visitors as a guide for the first five years of their child's life, in addition to receiving their professional opinions and perspectives, gave them a chance as moms to learn new things.

"I don't think I would know how to be stress free. Trying to do everything at one time, knowing that I can't. It's okay to take time out for yourself."

"Well, they have helped me with the older boy because of the problem with his not wanting to speak."

"The home visiting program means that I will always have somebody to guide me through the kids growing up the first five years."

PARTNER Tool survey 2014-2015 administered with Orange County MIECHV collaborators:

Select the organizations with which you have an established relationship (either formal or informal).

Collaboration among organizations and groups was measured through the **Program to Analyze, Record, and Track Networks to Enhance Relationships (PARTNER Tool)** survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of Healthy Families Florida in Orange County.

Time I Survey (Summer 2014)

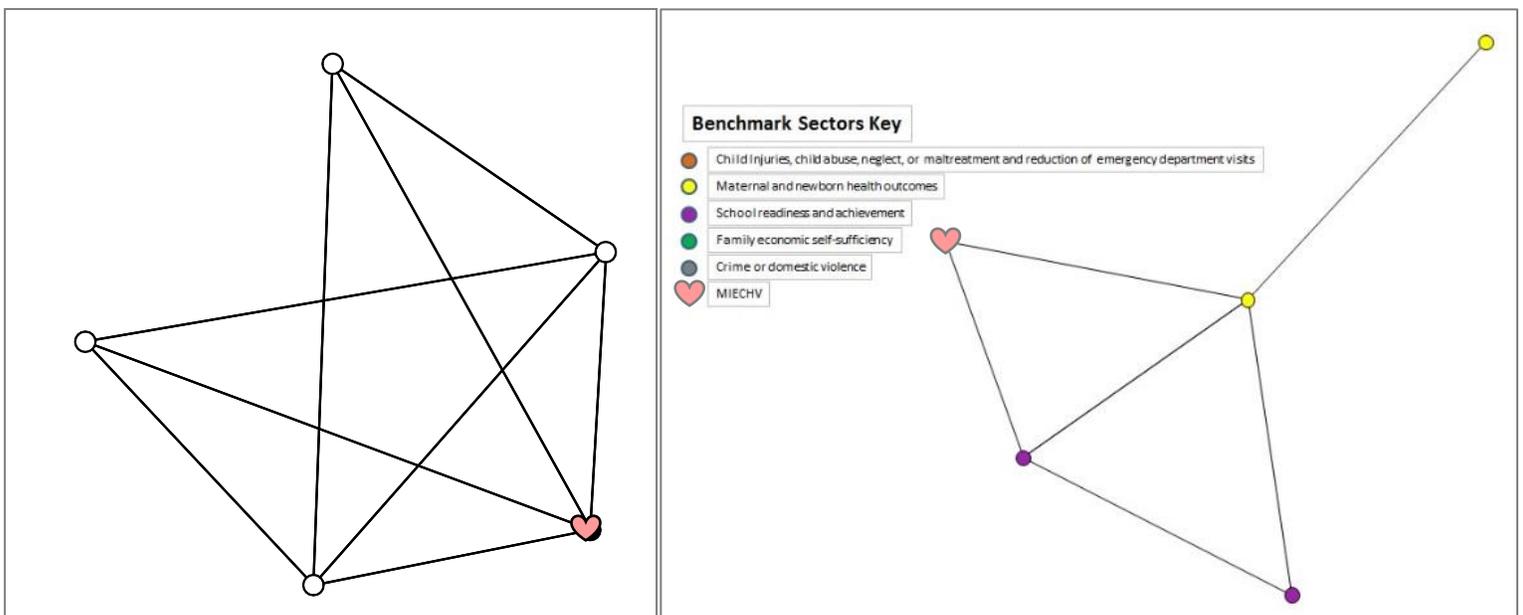
Number of Participants: 4/5

Response Rate: 66.0%

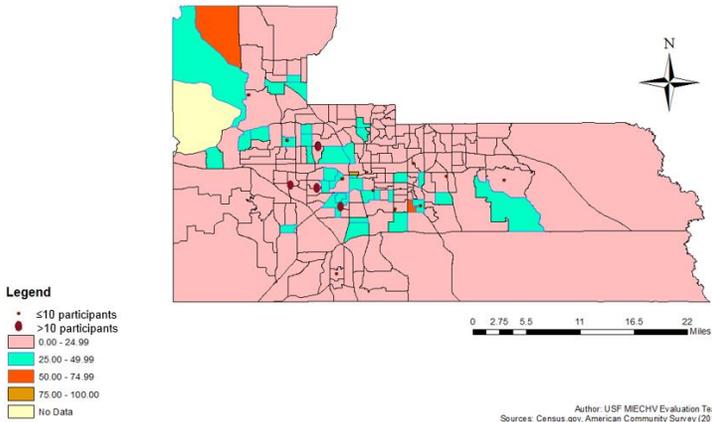
Time II Survey (Summer 2015)

Number of Participants: 4/5

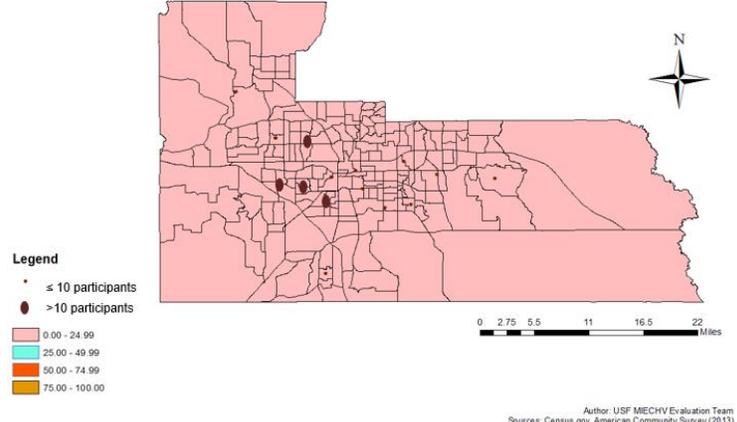
Response Rate: 80.0%



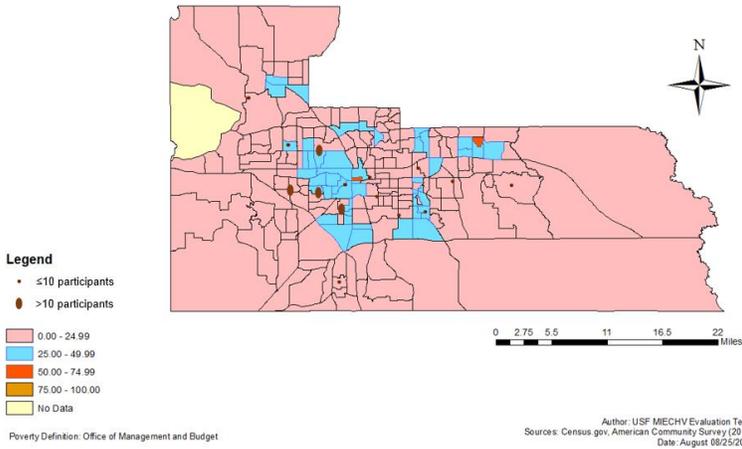
Orange County Participants Mapped at Zip Code Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



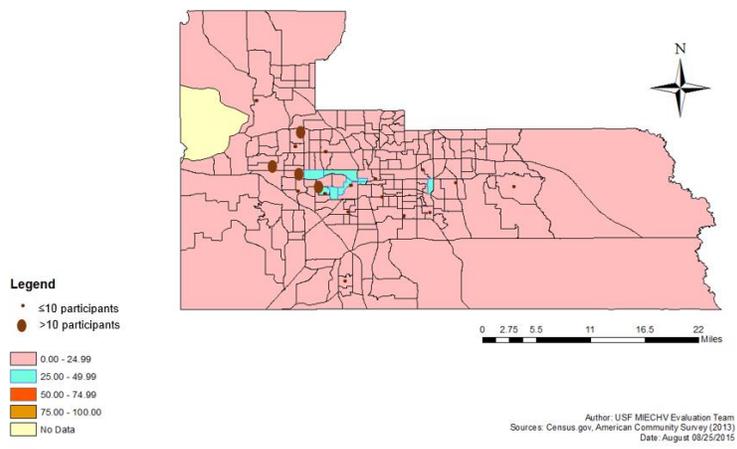
Orange County Participants Mapped at Zip Code Level to Percentage of Limited English - Speaking Households at the Census Tract Level



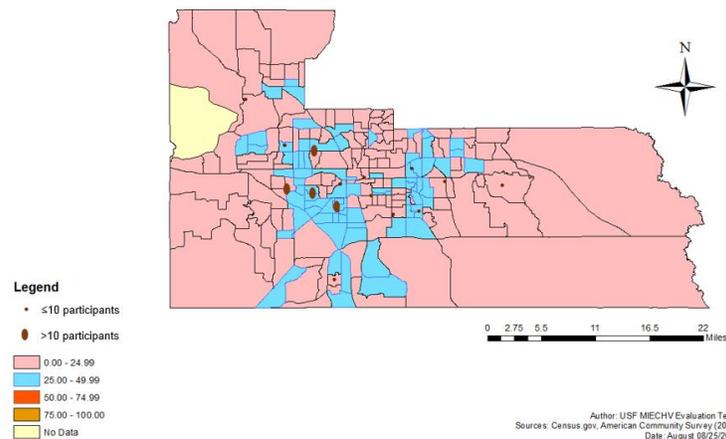
Orange County Participants Mapped at Zip Code Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



Orange County Participants Mapped at Zip Code Level to Percentage of Unemployed Individuals at the Census Tract Level



Orange County Participants Mapped at Zip Code Level to Percentage of Uninsured Individuals at the Census Tract Level

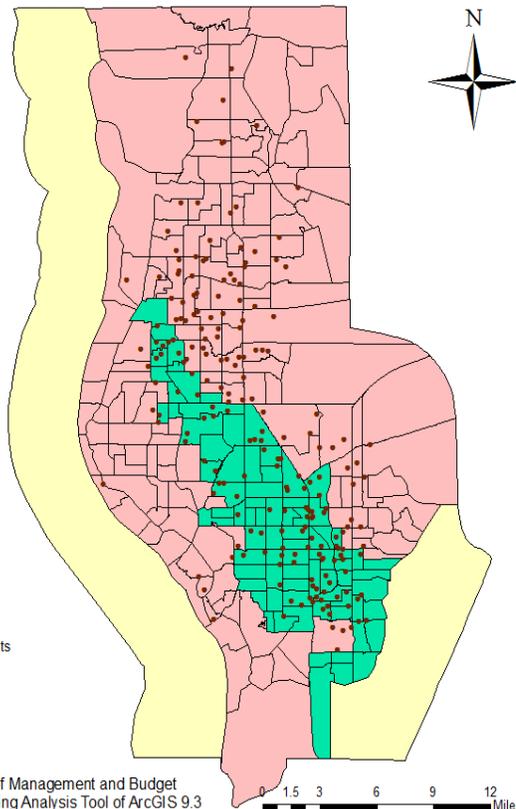


MIECHV Evaluation Overview

Pinellas County



Pinellas County MIECHV Participants Mapped at the Census Tract Level into Two Groups Based on Percentage of Unemployment, No Insurance, and Those Who Live in Poverty at the Census Tract Level



Legend

- MIECHV Participants
- Low Percentage
- High Percentage
- No Data

Poverty Definition: Office of Management and Budget Grouping Based on Grouping Analysis Tool of ArcGIS 9.3

High Percentage: Mean (Poverty: 12.7 %, No Insurance: 21.7%, and Unemployment: 20.5%)

Low Percentage: Mean (Poverty: 9.6%, No Insurance: 15.3%, and Unemployment: 11.5%)

Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: August 08/25/2015

Focus groups / interviews conducted with staff:

What do you consider the biggest strength(s) of your program?

The MIECHV staff in Pinellas County shared numerous strengths of their program, such as having experienced and well-trained staff in a variety of disciplines who are committed and dedicated to their families' progress. The staff in Pinellas are also able to provide support to families who may not be able to receive such a benefit from other service providers. PAT+ tailors services to the specific needs of participant families and helps with other issues, in addition to substance abuse, that are apparent in the families' lives.

"Probably the support that we offer families."

"I think the staff, really, and their commitment to their clients is the biggest strength."

"I would say staff, but in terms of their ability, their team, the team they've built – and it's all based on each person's strengths and weaknesses."

"We identify the trauma that got them to this point, and we have a lot of different areas and skills within our staff that can meet those needs..."

"There are a lot of communication. They are familiar with each other's challenging cases and have suggestions."

"That was what I was going to kind of say, the consistency that we offer. Because a lot of our families, they don't have any consistency."

What do you think are the most important outcomes of the program?

The staff of the MIECHV Program in Pinellas County stated that the most important outcomes of the program included: increased knowledge, confidence, and competence, as well as better parenting, child development skills, and understanding of employment and healthcare needs. Of additional importance, the PAT+ staff elaborated on how their program contributes to the empowerment of women, the preparation of expecting mothers for a healthy pregnancy, and the establishment of stronger bonds between the mother and child.

"A strong parent-child relationship motivates a mom to work towards other things, and get up and go."

"We can get them to move forward and out of that lifestyle and create a good, quality atmosphere for that child."

"Well, I just think a well-functioning parent-child relationship is what our ultimate goal is because I think that solves a lot of the other problems like the drug abuse, the developmental delays."

What are some outcomes of the program that would be hard to measure?

Pinellas County's MIECHV Program staff identified numerous intangible benefits among their participants, such as measuring how they become self-efficient, learn to cope, prioritize, and take the opportunity to change their lives. Pinellas County staff mentioned that another immeasurable benefit of the PAT+ Program was how it allowed participants to stabilize their lifestyle, which better enables them to build a healthy family relationship moving forward.

Phone interviews conducted with Pinellas County MIECHV Program participants:

What does the home visiting program mean to you and your family?

Generally, most women voiced thanks for the informational support provided. However, the relationships (i.e., emotional support) that participants formed with their home visitors seemed to mean the most to participants.

“Since I’m not from here, this help has really been good.”

“It means that she is showing me the way that [I] don’t know, I guess maybe the difference and possibly then keeping this child, being able to know what to do with her.”

“Really getting up on the right track.”

“Taught us so much about communicating with each other and stuff, and it brought us more together for that reason.”

“It’s like a safety net.”

“One of our goals is to become self-sufficient all the way around the board, and she’s making that possible.”

PARTNER Tool survey 2014-2015 administered with PAT+ collaborators:

Select the organizations with which you have an established relationship (either formal or informal).

Collaboration among organizations and groups was measured through the **Program to Analyze, Record, and Track Networks to Enhance Relationships (PARTNER Tool)** survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of PAT+ in Pinellas County.

Time I Survey (Spring 2014)

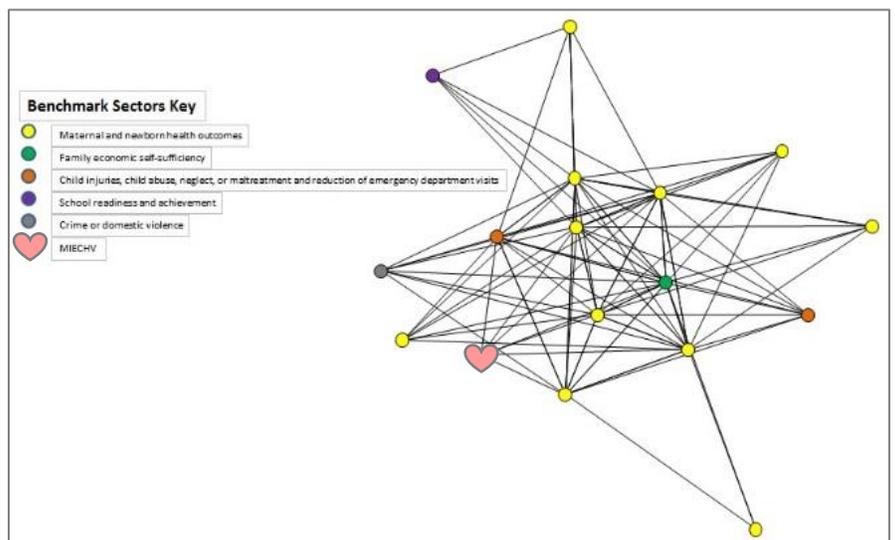
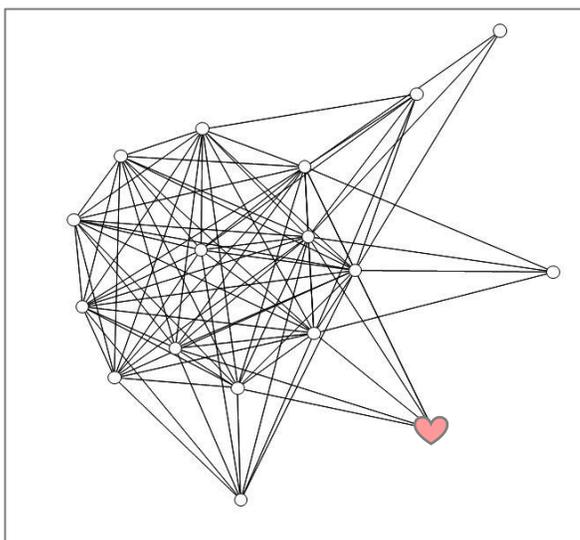
Number of Participants: 13/17

Response Rate: 53.1%

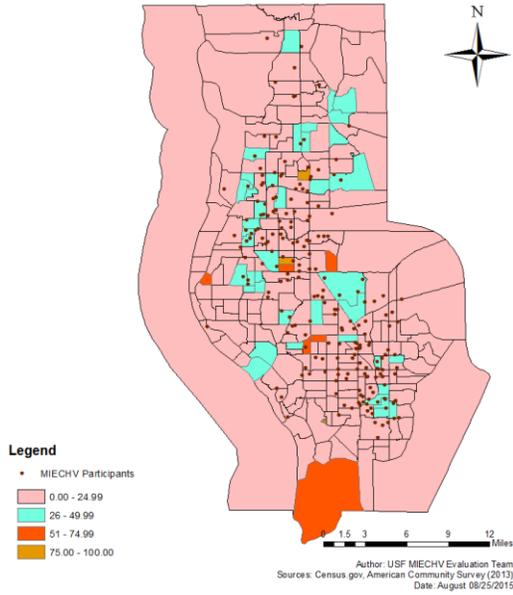
Time II Survey (Summer 2015)

Number of Participants: 10/17

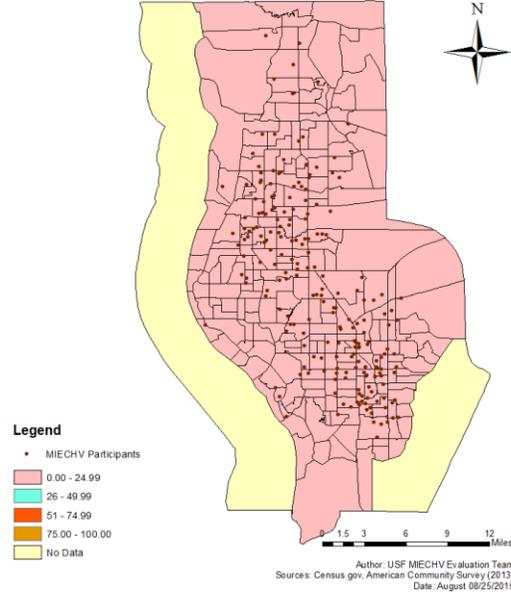
Response Rate: 47.2%



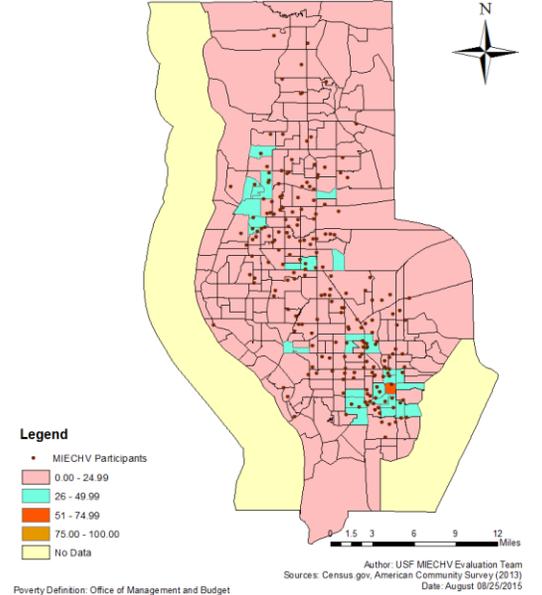
Pinellas County MIECHV Participants Mapped at the Census Tract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



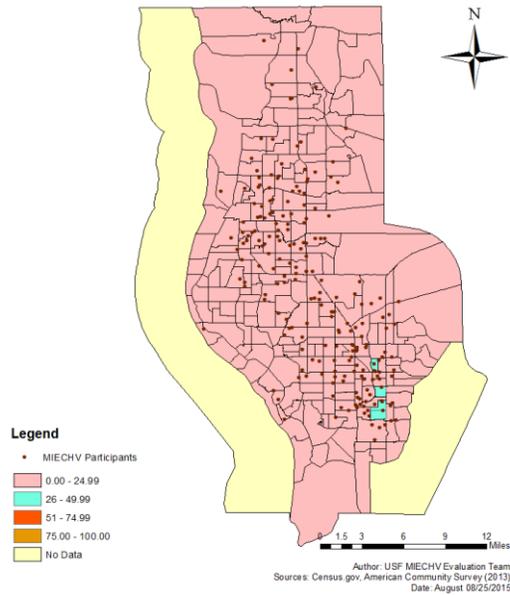
Pinellas County MIECHV Participants Mapped at the Census Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



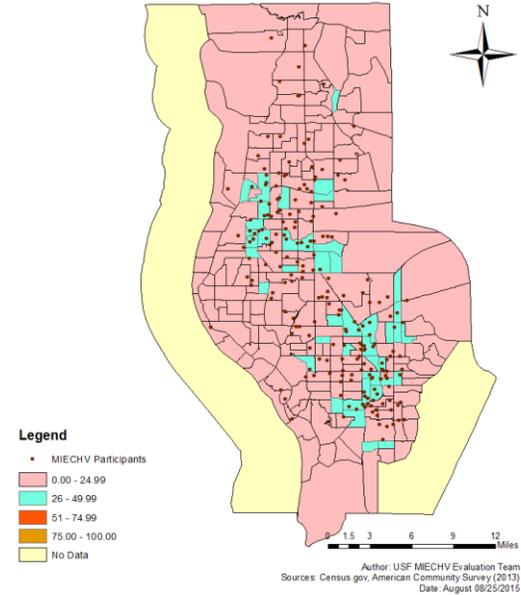
Pinellas County MIECHV Participants Mapped at the Census Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



Pinellas County MIECHV Participants Mapped at the Census Tract Level to Percentage of Unemployed Individuals at the Census Tract Level



Pinellas County MIECHV Participants Mapped at the Census Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



MIECHV Evaluation Overview

Southwest Florida Counties



Focus groups and interviews conducted with NFP staff in Southwest Florida Counties:

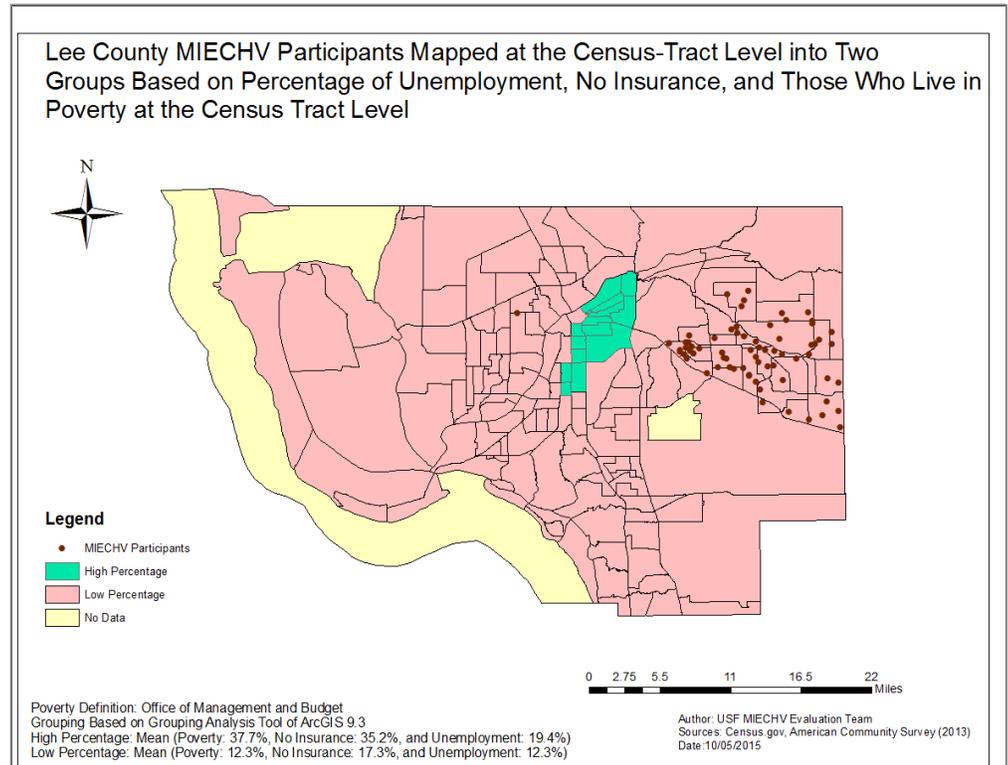
What do you consider the biggest strength(s) of your program?

The MIECHV program staff from three Southwest Florida Counties expressed that having a great infrastructure already in place for them to operate and being able to provide the best services to their clients were critical strengths of their program. The staff found further advantages in providing their families with individual access to a nurse home visitor through their Nurse-Family Partnership program. Lastly, the NFP staff elaborated on how their nurse home visitors were caring, committed, and invested in each of their clients.

"I think the biggest one is just the importance of teaching these mothers how to take care of themselves and preparing them to take care of their own babies."

"My nurse home visitors. They're caring, they're committed, and they have an invested interest in the clients."

"...hiring nurses too that were familiar with the area and maternal and child health, we still have quite a few of them."



What do you think are the most important outcomes of the program?

Southwest Florida Counties' MIECHV program staff stated that the most important outcome of their program was the ability to empower women. Other crucial outcomes of the program involved getting mothers ready for a healthy pregnancy and helping to build stronger bonds between the mother and her baby.

"That they get their prenatal care. That they learn how to take care of their infants and toddlers emotionally and to break some vicious cycles."

"I think everybody's making an impact on the breastfeeding rates, too."

What are some outcomes of the program that would be hard to measure?

Southwest Florida Counties' MIECHV program staff identified themes among participants that were hard to measure, such as quantifying the desire of their clients wanting to be mothers and wanting the best for their child. Another intangible outcome was the hypothetical comparison of what mothers in the program would have done versus what they actually did because of their nurse home visitor. The staff also mentioned how it would be difficult to measure the healthier choices that the clients are making as a result of the NFP program.

"When you talk to them about nutrition and making healthier choices, that is intangible because you can't really measure that, like how many vegetables did they eat before?"

"I think the intangible is what they would have done versus what they do. We only get what they do."

Phone interviews conducted with Southwest Florida MIECHV program participants:

What does the home visiting program mean to you and your family?

Generally, most women voiced thanks for the informational support provided. However, the relationships (i.e., emotional support) that participants formed with their nurse home visitors seemed to mean the most to participants.

"It's helped us a lot."

"It's been very important and with a lot support."

"It was very helpful with child birthing, and breastfeeding, and in helping me with the Apgar score when she was born, and what did they do to her, and giving her shots, and what did they put in her eyes."

"I wouldn't know anything. I'd be stuck on Google."

"Just peace of mind, honestly."

"It's important. It's helpful in supporting."

PARTNER Tool survey 2014-2015 administered with Southwest Florida MIECHV collaborators:

Select the organizations with which you have an established relationship (either formal or informal).

Collaboration among organizations and groups was measured through the **Program to Analyze, Record, and Track Networks to Enhance Relationships (PARTNER Tool)** survey completed by community partners and agency representatives. Maps that illustrate the connections between organizations (represented as a dot) in each community were developed from information provided by the respondents. The lines between each organization represent the presence of a relationship based on the responses indicating how frequently the two organizations work together in the context of Nurse-Family Partnership in Southwest Florida Counties.

Time I Survey (Spring 2014)

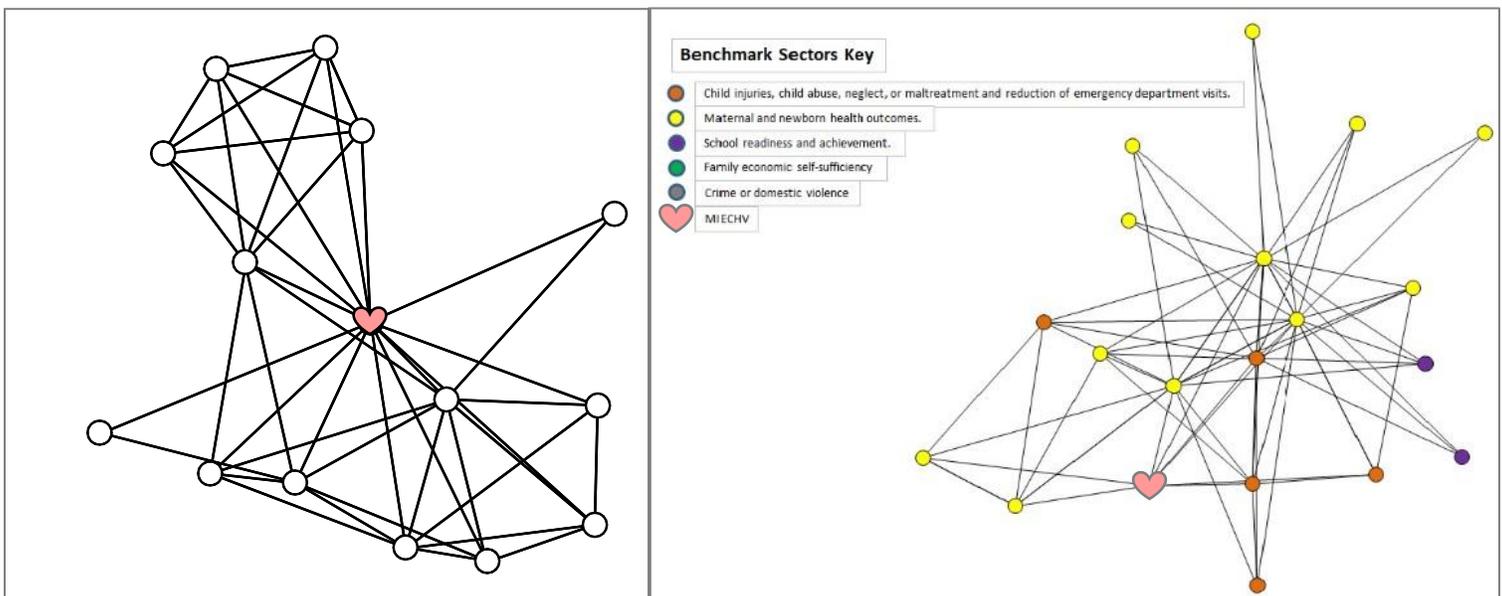
Number of Participants: 11/15

Response Rate: 64.7%

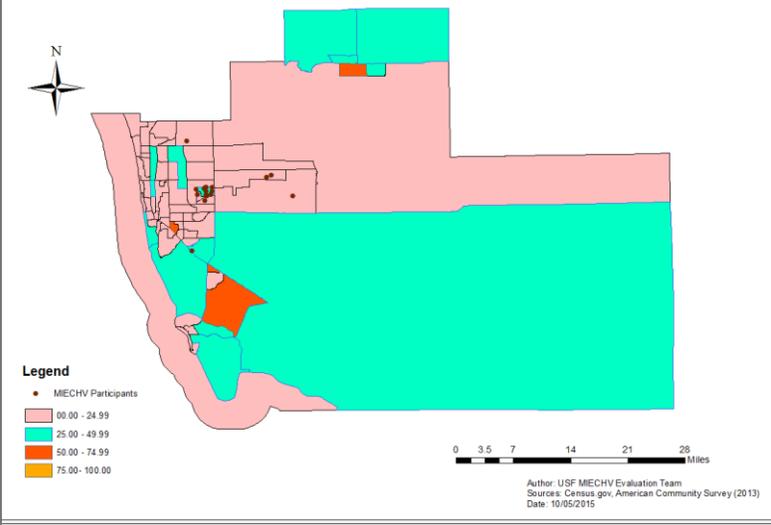
Time II Survey (Summer 2015)

Number of Participants: 14/20

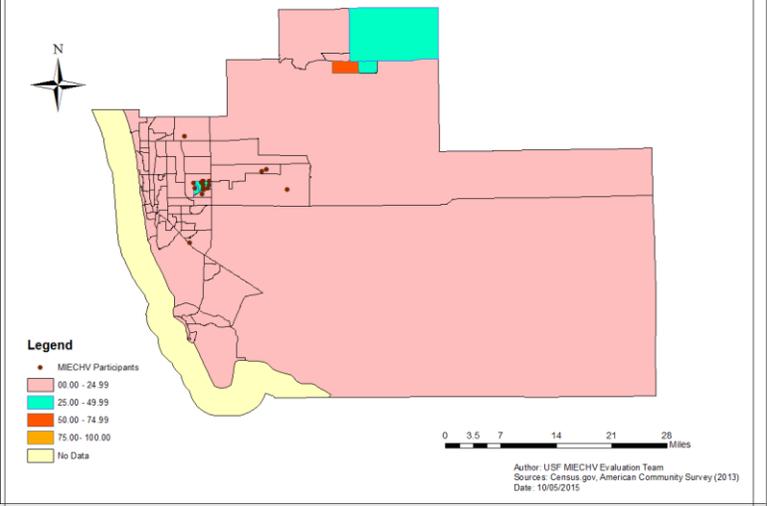
Response Rate: 61.1%



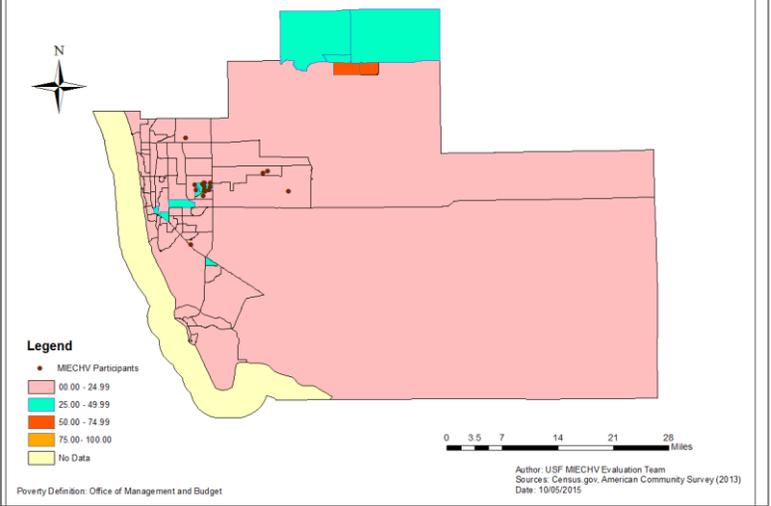
MIECHV Participants of Collier County Mapped at the CensusTract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



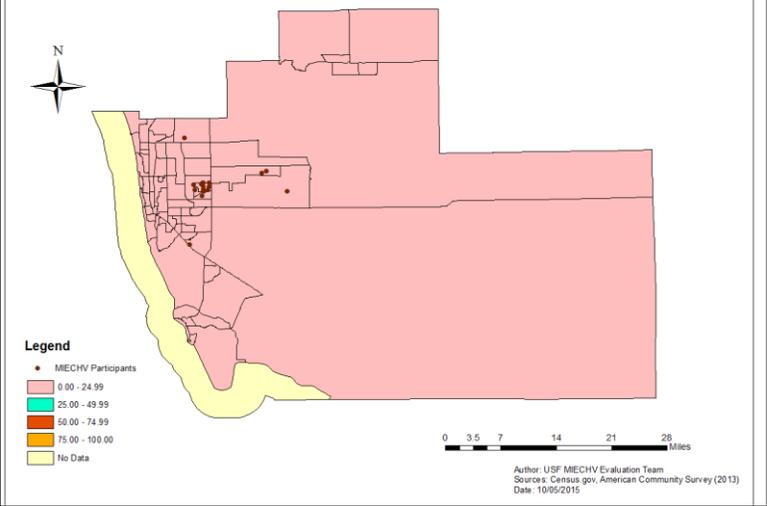
MIECHV Participants of Collier County Mapped at the CensusTract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



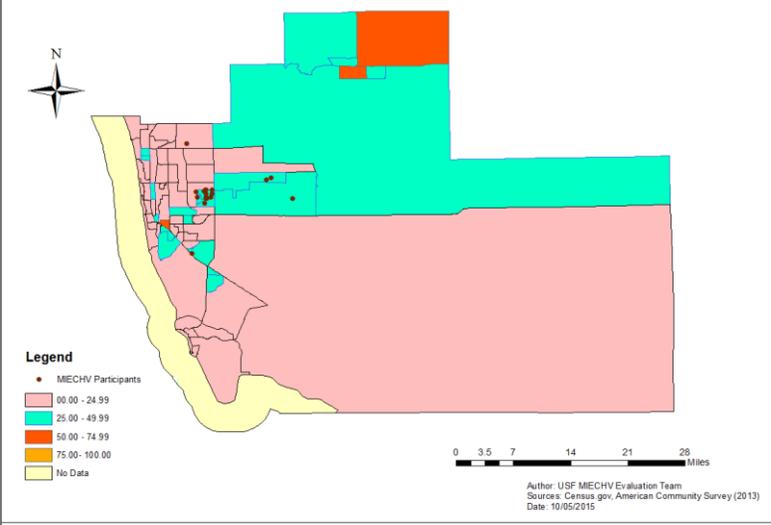
MIECHV Participants of Collier County Mapped at the Census Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



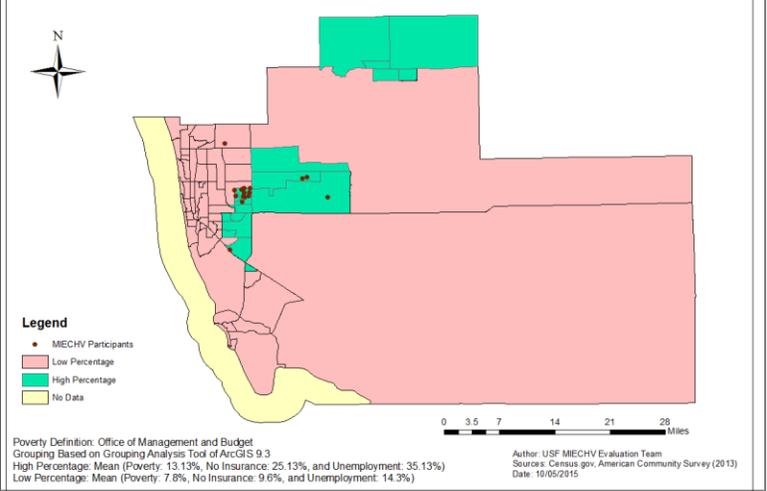
MIECHV Participants of Collier County Mapped at the CensusTract Level to Percentage of Unemployed Individuals at the Census Tract Level



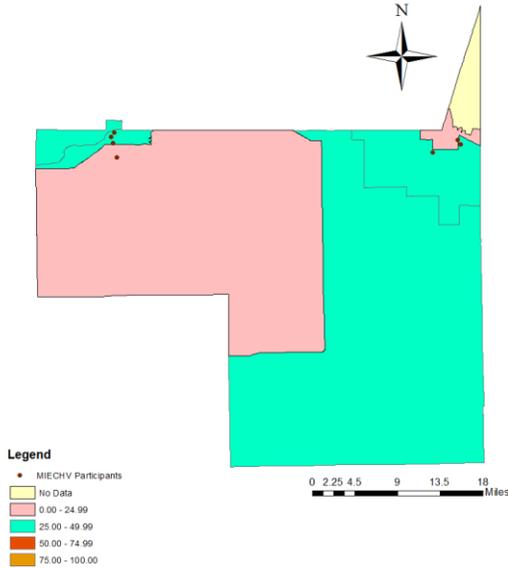
MIECHV Participants of Collier County Mapped at the CensusTract Level to Percentage of Uninsured Individuals at the Census Tract Level



MIECHV Participants of Collier County Mapped at the Census Tract Level into Two Groups Based on Percentage of Unemployment, No Insurance, and Those who Live in Poverty at the Census Tract Level

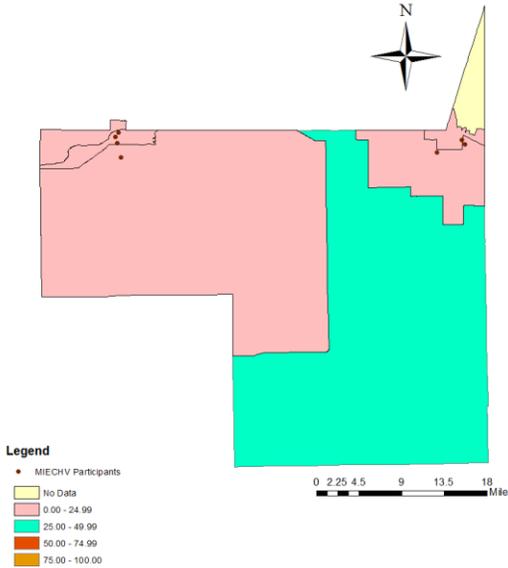


Hendry County MIECHV Participants Mapped at the Census Tract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



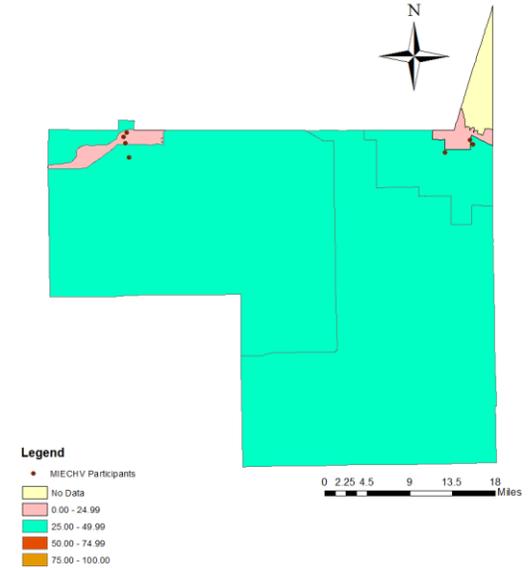
Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 10/05/2015

Hendry County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



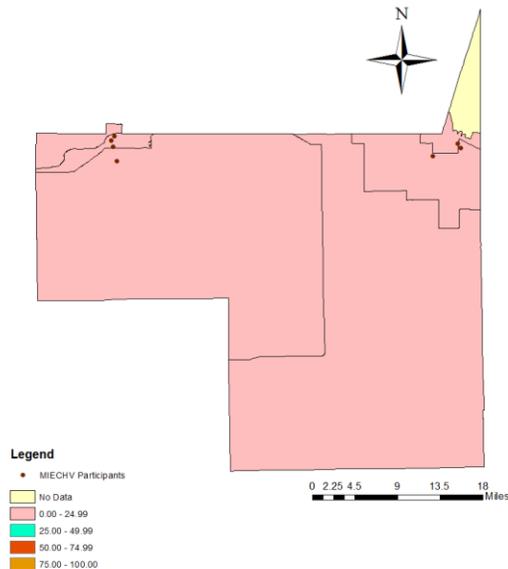
Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 10/05/2015

Hendry County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



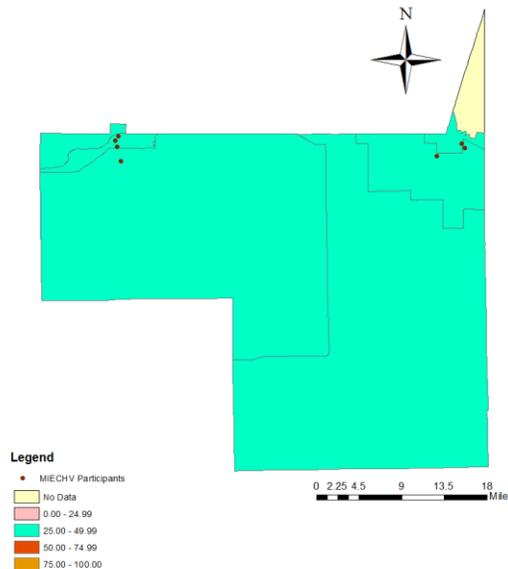
Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 10/05/2015
Poverty Definition: Office of Management and Budget

Hendry County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Unemployed Individuals at the Census Tract Level



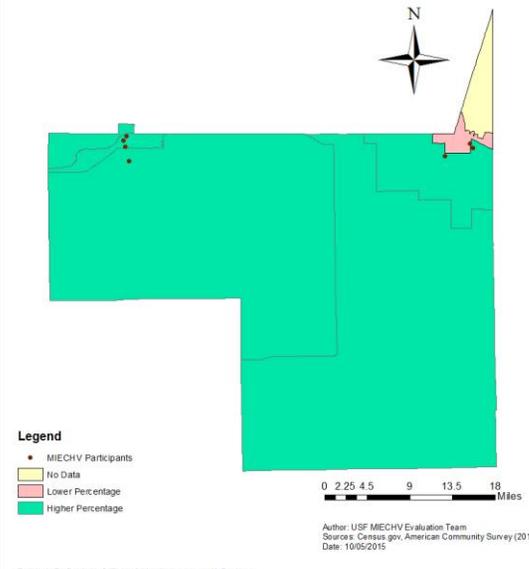
Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 10/05/2015

Hendry County MIECHV Participants Mapped at the Census-Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



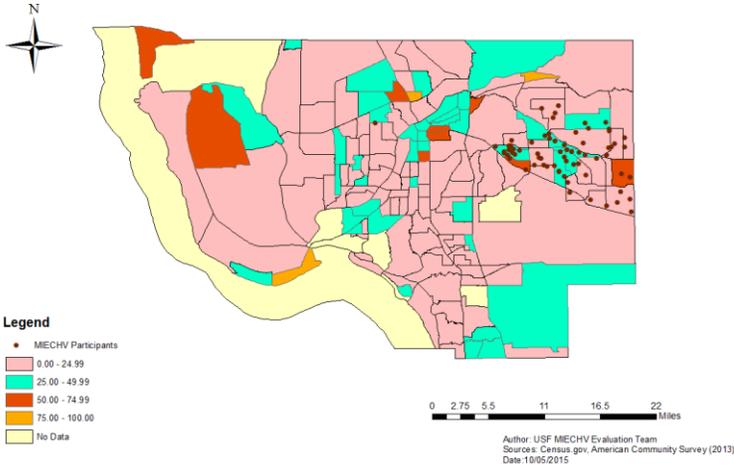
Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 10/05/2015

Hendry County MIECHV Participants Mapped at the Census-Tract Level into Two Groups Based on Percentage of Unemployment, No Insurance, and Those Who Live in Poverty at the Census Tract Level

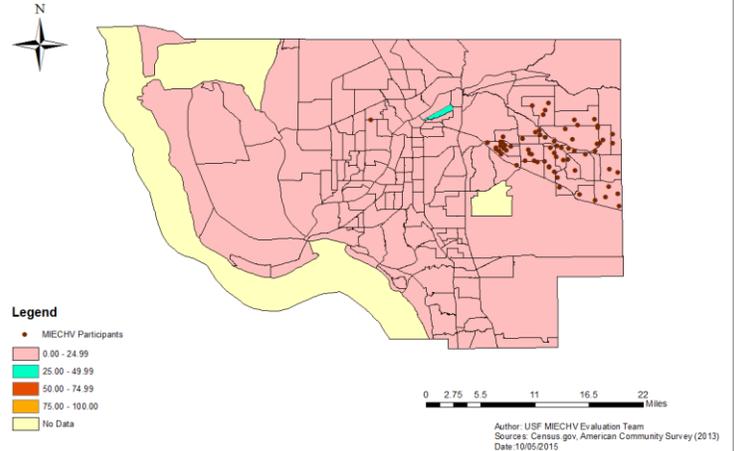


Author: USF MIECHV Evaluation Team
Sources: Census.gov, American Community Survey (2013)
Date: 10/05/2015
Poverty Definition: Office of Management and Budget
Grouping Based on Grouping Analysis Tool of ArcGIS 9.3
High Percentage: Mean (Poverty: 17.0%, No Insurance: 36.4%, and Unemployment: 30.2%)
Low Percentage: Mean (Poverty: 8.0%, No Insurance: 30.0%, and Unemployment: 14.0%)

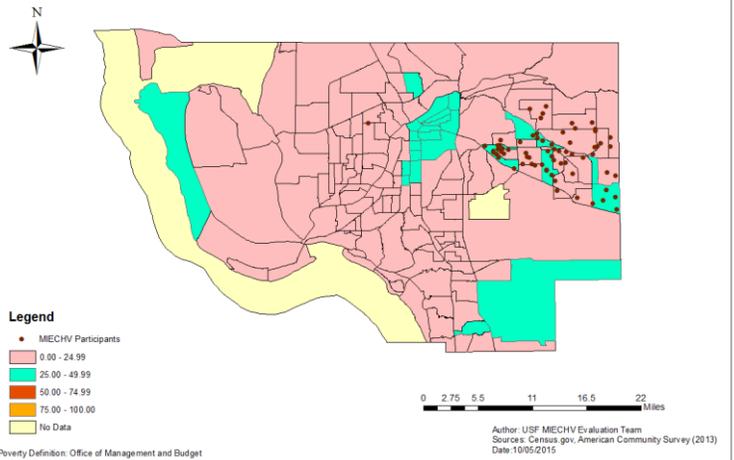
MIECHV Participants of Lee County Mapped at the Census Tract Level to Percentage of Individuals Having Less than High School Education at the Census Tract Level



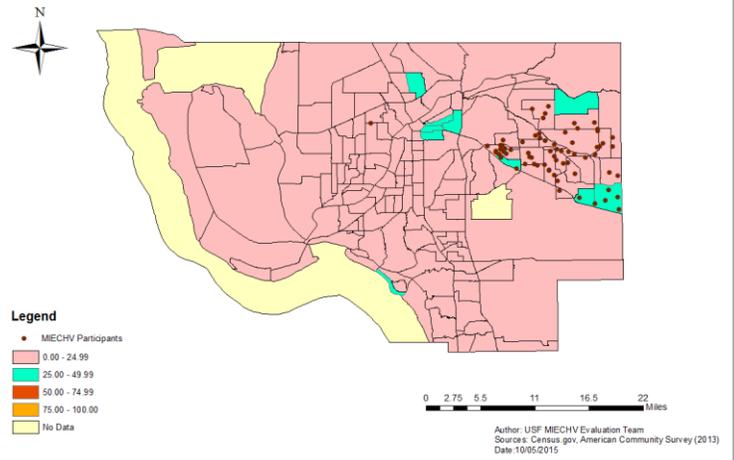
MIECHV Participants of Lee County Mapped at the Census Tract Level to Percentage of Limited English - Speaking Households at the Census Tract Level



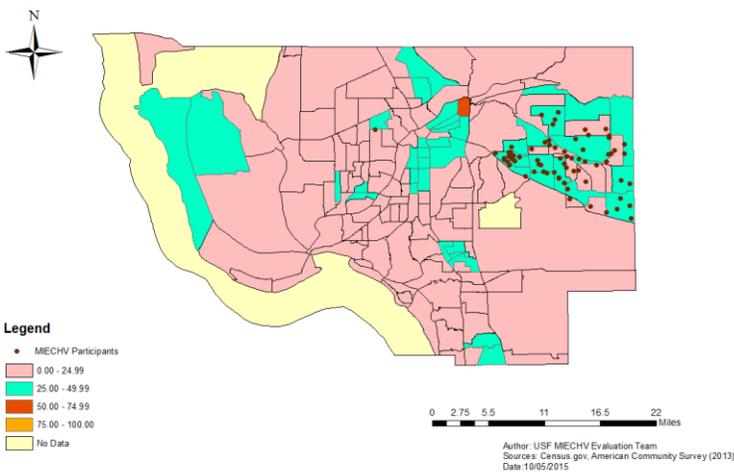
MIECHV Participants of Lee County Mapped at the Census Tract Level to Percentage of Individuals Who Live in Poverty at the Census Tract Level



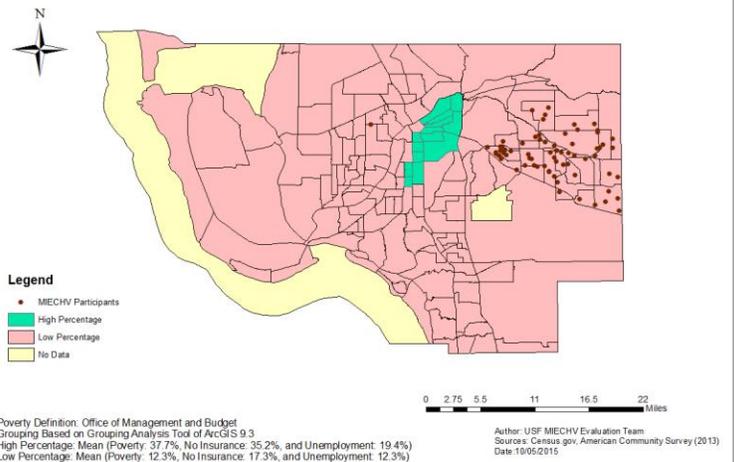
MIECHV Participants of Lee County Mapped at the Census Tract Level to Percentage of Unemployed Individuals at the Census Tract Level



MIECHV Participants of Lee County Mapped at the Census Tract Level to Percentage of Uninsured Individuals at the Census Tract Level



Lee County MIECHV Participants Mapped at the Census-Tract Level into Two Groups Based on Percentage of Unemployment, No Insurance, and Those Who Live in Poverty at the Census Tract Level



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