

Washington University in St. Louis

Washington University Open Scholarship

Center for Public Health Systems Science

Brown School

1-1-2016

What is the Raising St. Louis Program Up To?

Center for Public Health Systems Science

Follow this and additional works at: <https://openscholarship.wustl.edu/cphss>

Recommended Citation

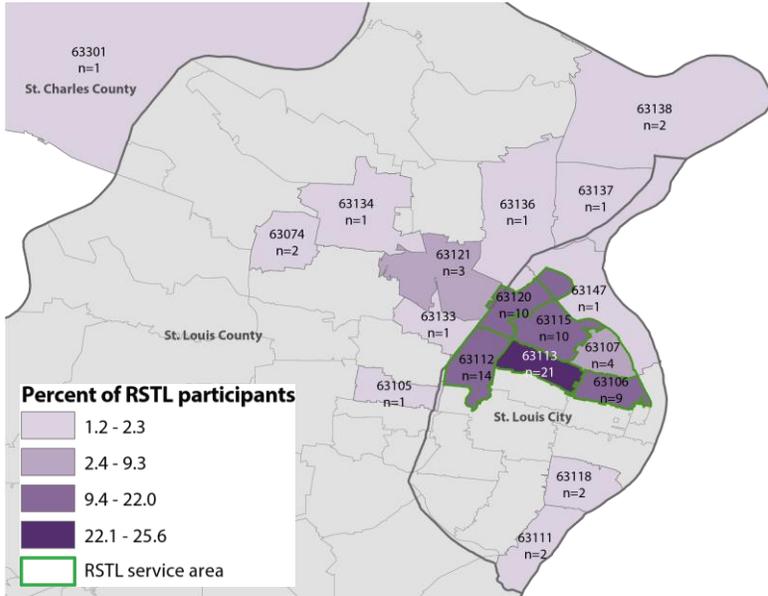
Center for Public Health Systems Science, "What is the Raising St. Louis Program Up To?" (2016). *Center for Public Health Systems Science*. 59.

<https://openscholarship.wustl.edu/cphss/59>

This Report Tool is brought to you for free and open access by the Brown School at Washington University Open Scholarship. It has been accepted for inclusion in Center for Public Health Systems Science by an authorized administrator of Washington University Open Scholarship. For more information, please contact digital@wumail.wustl.edu.

July 2016

PROGRAM PARTICIPANTS



Raising St. Louis (RSTL) began enrolling pregnant moms in the program in early 2014.

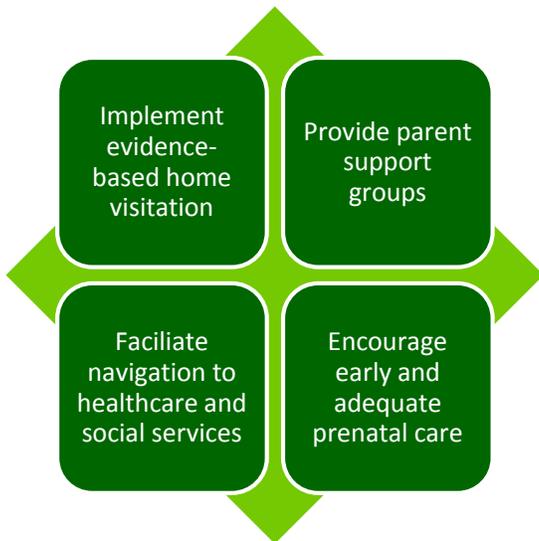
Through the second year of program implementation, **RSTL served 86 moms and 62 babies** living throughout the St. Louis region. The *map at the left* shows you where families lived at as of the end of 2015. Most moms are young adults, African-Americans, with high-school or some college, single, and not a first-time mother at the time of enrollment. The majority of moms joined the program in their third trimester. As of end of 2015, RSTL children are mostly infants, between 0 to 5 months old.

The participants heard about the program through various health centers and hospitals. **Moms are most satisfied with their connection to nurses and parent educators** who support and educate the moms during home visits.



Core Components of RSTL program

PROGRAM MODEL AND IMPLEMENTATION



RSTL has four core components of the program, *shown in the figure on the left*. Home visits utilize two models: Nurses for Newborns (NFN) and Parents as Teachers (PAT). NFN nurses and PAT parent educators (PEs) work closely to support moms before and after the pregnancy. At the end of 2015, the nurses and PEs together conducted **1,497 home visits**.

The nurses and PEs utilize **The Kotelchuck Index** to measure adequacy of prenatal care, the **Everyday Stressors Index (ESI)** to measure level of stress, and the **Edinburgh Postnatal Depression Scale (EPDS)** to measure level of depression. These measures help the nurses and PEs to identify needed resources and then help these families navigate to existing social and health services in the region.

The measures indicated that most moms in the program had received at least adequate or better prenatal care. Moms who completed ESI

and EPDS assessments showed that most of them had normal levels of stress and depression. Efforts for the future are being planned to ensure that all enrolled and eligible moms receive ongoing stress and depression assessments throughout their duration in the program.

On average, **moms were in the program for 96 days prior to the delivery** and the largest proportion of moms enrolled in their third trimester of pregnancy. The program continues to attempt to enroll moms in the earliest trimester possible so that they and their expected children can get the most benefit possible out of the RSTL program.



More than 88% of the fifty-eight RSTL singleton born children were full-term and had normal birth weight. RSTL parent educators screen children for developmental delays (ASQ-3) between the ages of two months and five years old, and potential social-emotional concerns (ASQ-SE) between 6 months and five years old. Through the end of 2015, RSTL completed the assessments for more than 90% of the babies. The assessments indicated that there are no areas of concern regarding potential developmental delays or socio-emotional issues among the RSTL children. RSTL children also underwent vision, hearing, and health screenings, which showed no concerning outcomes.

GROUP CONNECTIONS MEETINGS

RSTL hosts Group Connections Meetings about once every month to support caregivers by discussing a topic useful for the families. Moms and their families have shared that they find the meetings helpful to learn about various aspects of raising their families, connecting with other families to build an informal support network, and have a “collective learning” opportunity. Overall, RSTL has hosted seventeen Group Connections Meetings, attended by 39 unique moms and 14 unique fathers or father-figures.

NEED IDENTIFICATION AND REFERRAL TO RESOURCES

RSTL program helps families to identify their need(s) and facilitates the process of accessing available health and social services through referrals to appropriate organizations or services. Overall, 67 families identified 398 unique needs. The top five needs identified were: **Breastfeeding Education/Support, Child Care Services, Church/Religion and Clinic, Clothing & Household items, and Counseling.** Families were referred to more than 75 organizations by a nurse or parent educator. The RSTL team is working towards making sure that the majority identified needs are followed up and addressed by the referred services.



FATHER ENGAGEMENT

RSTL program collaborates with the **Fathers’ Support Center (FSC)** to enhance father engagement through direct conversations with the fathers and helping RSTL to plan special events focused on fathers and father-figures.

Out of 61 families, 9% of the participating families do not have a father-figure, which contrasts with the findings from the program planning phase that informed having much higher proportion of families with no father-figure. RSTL team continues its efforts in gathering complete information on father engagement and provide necessary support to the families so that children receive positive parenting.

For more information, contact:
 Nikole Lobb Dougherty
nlobbdougherty@wustl.edu



RAISING ST. LOUIS: LOOKING FORWARD

RSTL program continues to grow by enrolling eligible families from selected St. Louis neighborhoods and improving the program quality based on lessons learned along the way. The program plans to continue providing non-judgmental support to families during home visits, working with participants to identify and address specific needs, and hosting useful Group Connection Meetings in collaboration with the Fathers’ Support Center. In order to maintain and improve the program quality, RSTL team also continues to work towards building robust internal systems that capture accurate and complete information about program fidelity and program outcomes.