Special thanks to...

The foundations that have supported the program and/or the evaluation since 1996:

• David and Lucile Packard Foundation
• Health Plan of San Mateo
• Peninsula Community Foundation
• California Endowment
• Lucile Packard Foundation for Children’s Health
• Children and Families First Commission
The Prenatal to Three Initiative has grown over the past five years into a model health program worthy of the state and national attention it has received. It is San Mateo County’s largest home visitation program that provides comprehensive public health, maternal and infant mental health, and substance abuse outreach services. It is also a community collaborative of service providers working together to improve the system of services for the prenatal to three population.

The County hired a team of evaluators in 1997 with the purpose of assessing the success of Prenatal to Three in meeting its goals. The goals were defined during an extensive community planning process as follow:

1) Build parenting capacity and confidence;
2) Facilitate early identification of children’s health and developmental risks,
3) Provide a seamless system of referral for the prenatal to age three population.

These goals led to measurable outcomes that the evaluators have studied over the past five years. This report summarizes their key findings. A more detailed report is available on request from Karen Peifer Ph.D., Evaluation Coordinator, or Mary Hansell Dr.P.H., Deputy Director of Public Health. (kpeifer@ix.netcom.com, mhansell@co.sanmateo.ca.us). Both reports focus on the accomplishments of Prenatal to Three and illustrate the impact of the intervention on parental behaviors and community responses.

### Profile of 2,653 Clients Served by Prenatal to Three—Sept 1, 2000 to Sept 1, 2001

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>81.5%</td>
</tr>
<tr>
<td>White</td>
<td>3.6%</td>
</tr>
<tr>
<td>Black</td>
<td>3.5%</td>
</tr>
<tr>
<td>Asian</td>
<td>3.2%</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Education</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 11 years</td>
<td>65.8%</td>
</tr>
<tr>
<td>&gt;=12 Years</td>
<td>34.2%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Language</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spanish</td>
<td>75.8%</td>
</tr>
<tr>
<td>English</td>
<td>13.1%</td>
</tr>
<tr>
<td>Other</td>
<td>11.1%</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Married</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>55.8%</td>
</tr>
</tbody>
</table>
Evaluation Methodology

The evaluation plan included surveying both providers of services and families, the recipients of services. We asked providers their opinions on how Prenatal to Three impacted the system of care and expanded community capacity to serve families. We also conducted two telephone surveys of randomly sampled families to measure trends in parental behaviors. The two parental surveys, Survey I in 1998-99 and Survey II in 1999-2000, were reviewed for cultural competence and for Human Subject protection.

HOME VISITATION

In previous research, home visitation by public health nurses has been shown to have an effect on parental behaviors and child health and well being outcomes. Interventions focused on parental behaviors toward their child’s growth and development can prevent developmental problems and promote positive health and emotional development in children. Prenatal to Three uses the greatest amount of program resources to provide home visiting by a sixty-person, multi-disciplinary team.

Key findings

• In the first year of operation, 1996-97, Pre-to-Three staff visited 1,870 families with an average of 3.8 visits per family.
• In the last year, 2000-01, staff visited 5,521 families with an average of 5.9 visits per family.
• The direct cost of the program in year 1 was $1,430,480, and in the last year it was $3,736,708. Approximately 50% of program funds are reimbursed by MediCal (TCM, MAA, EPSDT). The remaining 50% are grants and funds from the county general fund.
• The cost for one home visit by staff in the public health program decreased from $222 per visit in year 1 to $111 per visit in the last year. Cost for a mental health visit also decreased from $96 per visit in year 1 to $69 in the last year.
• According to Survey II, 75% of families were very satisfied with the services provided by the home visitors.

According to the provider survey:

• 75% of providers felt that Prenatal to Three was influential in coordinating services in the community.
• 87.5% felt that parents were more informed consumers when they came to their offices as a result of the educational efforts of Prenatal to Three staff.
• 83% felt that Prenatal to Three offered culturally competent services.
• 66.7% were aware of Prenatal to Three staff liaison work in the community.

BREASTFEEDING AND NUTRITIONAL SUPPORT

The Healthy People 2010 Standards stipulate that 75% of mothers will initiate breastfeeding their infants after birth and that at least 50% of those who initiate breastfeeding will continue until their babies are 5 to 6 months old. Prenatal to Three public health nurses, community workers and dieticians passionately support breastfeeding through a range of community and individual level interventions.

Key findings
• According to Survey I, 87.7% of mothers initiated breastfeeding their infants after birth, which exceeds the Healthy People 2010 Standards but only 30.1% breastfed for 6 months.
• According to Survey II, 88.0% of mothers initiated breastfeeding their infant after birth and 51.3% continued doing so at 6 months. Both measures exceed the Healthy People 2010 Standards.

EARLY LITERACY EFFORTS

Reading to an infant facilitates learning language, a positive association with books, and infant/caregiver attachment. In the longer term, it also prepares children for school. Efforts to promote early reading to infants have been a prominent goal of the Prenatal to Three Initiative.

Key findings
• In Survey I Prenatal to Three families:
  • Showed a picture book to their infants 45% more than non-Prenatal to Three families.
  • Read a book to their infants 40.4% more than non-Prenatal to Three families.
  • Played with their infants 10.8% more than non-Prenatal to Three families.
  • Visited the library in the past 6 months 33% more than non-Prenatal to Three families.
  • Visited the library 41% more often in past month than non-Prenatal to Three families.

■ In Survey II:
  • 65.3% of respondents showed a book or read to the infant almost daily
  • 98% of mothers and 93% of fathers played with the baby almost daily
  • 69.4% of respondent families enrolled in Prenatal to Three went to the library in the last month (average 1.9 times per month).

CHILD SAFETY

Unintentional accidents and injuries are the leading cause of death in young children. Prenatal to Three staff support parents in practicing preventive measures to reduce death and injury in young children, measures such as use of child car seats, placing their infants to sleep on their backs and maintenance of smoke alarms in homes.

Key findings
• In Survey I, 95.6% of respondents used car seats on a regular basis and in Survey II, 97% reported doing so.
• In Survey I, 81.9% reported placing their infant to sleep on their back and in Survey II, 51.3% reported doing so.
• In Survey I, 92% reported having a working smoke detector while in Survey II, 87.6% reported having one.
TOBACCO USE BY PARENTS

Maternal use of tobacco products during pregnancy has negative effects on the developing fetus and long term effects throughout the child’s life. Children exposed to second hand smoke in the home, by either parent, also experience long term health effects.

Key findings
• In Survey I, 17.4% of mothers reported smoking during their pregnancy but only 2.9% reported doing so in Survey II.
• In Survey I, 30.6% reported that one or more persons living in the home smoked after the baby was born. In Survey II this dropped to 24.7%

MENTAL HEALTH AND SUBSTANCE ABUSE SERVICE ACCESS

Children of parents who have symptoms of a mental illness are at greater risk than those of parents who are not having symptoms. Nonetheless, low income parents, particularly immigrants, have limited access to mental health and substance abuse services. Prenatal to Three has made mental health and substance abuse services available in the home.

Key findings
• In Survey I, of parents who had a history of mental health problems, 54.1% received a home visit. In Survey II, this percentage increased to 80.8% receiving a home visit.
• In Survey I, of parents who reported symptoms of post partum depression, 56.2% received a home visit. In Survey II this increased to 78.9%.

INFANT AND CHILD SERVICES

Children with special medical needs and their families benefit from home visitation services. Prenatal to Three staff provide emotional support, education and service coordination for these families.

Key findings
• In Survey I, 72% of families with premature infants received a home visit and this increased to 89.5% in Survey II
• In Survey I, 79.4% of families with children who had medical problems at birth received a home visit in and this improved to 84.6% in Survey II.

TRENDS IN THE CHILD WELFARE SYSTEM

Childhood maltreatment has a profound impact on the emotional, behavioral, cognitive, social and physical functioning of children. Prenatal to Three staff are invited into the homes of families that may be a greater risk for child abuse and these families are under more scrutiny because of the home visits. We speculated that the rates of reporting suspected child abuse would increase in the county spurring an increase in the numbers in family maintenance. Conversely, rates of family reunification, or out of home placement, and permanent placement of a child into the foster care system should have decreased as a result of Prenatal to Three case management and family education and support. We were able to obtain trends data for children under 5 years of age from the Center for Social Welfare at the University of California, Berkeley and found the following trends for San Mateo County compared to the state of California.

Key findings
• The incidence of children under the age of 5 years entering foster care in the state of California has remained relatively constant from 1993 to 2000 at 5.2:1000.
• The incidence of children under the age of 5 years entering the foster care in San Mateo county was 2.4:1000 in 1993-96 and 1.7:1000 during 1997-2000.
Summary

The Prenatal to Three Initiative began with idealistic goals to improve the life trajectory of all low-income children born in the county. The evaluation findings indicate that there have been significant changes in parental behaviors and in the system of care to provide services for high risk families. Still, there is room for improvement. In particular, many providers felt that Prenatal to Three should expand eligibility criteria beyond MediCal and children born in the county. The funds from Proposition 10 may be a resource for this expansion.

PROGRAM AWARDS


1999 Joint Venture Silicon Valley Achievement Award for Inclusive Society.


1998 San Francisco/Parent Magazine Award for Friend of the Public.

1997 State Maternal and Child Health Award for an Innovative Program.
EVALUATION SUPPORTED BY:
THE DAVID AND LUCILE PACKARD FOUNDATION
AND THE
HEALTH PLAN OF SAN MATEO

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