Our Evidence Rating System

Each of the programs listed in the following pages has been assessed carefully by a team of researchers with the Center for Children, Families, and Workforce Development. Given that each government agency, evidence-based clearing house, and agency provided different requirements for classification as effective our team used existing models from government agencies to assess programs. We used research published by programs, outside evaluators, and assessments by federal agencies when available. In addition, we also included culturally-centered practices as a level of evidence. These following ratings demonstrate how much evidence exists on the effectiveness of the program at producing stated outcomes.

LEVEL 1: EVIDENCED-BASED
Extensive research has proven that programs at this level are effective and procedures are in place for replication.
- OR -
Programs that are culture-centered emerging practices with positive peer-reviewed research findings.

LEVEL 2: RESEARCH INFORMED
Multiple studies on these programs have yielded positive results indicating that they are likely effective, however, they do not have the high level of evidence required to meet level 1 requirements.
- OR -
A Culture-centered emerging practice with no published research findings.

LEVEL 3: INNOVATIVE PROGRAMS - PROMISING PROGRAM THAT HAS BEEN/IS BEING PILOTED.
Emerging programs that are created by or have the support of nationally recognized experts or expert communities, but do not yet have concrete evidence of outcomes.

Definition of Terms

Program Tier
- **Universal**: Includes strategies that can be offered to the full population, based on the evidence that it is likely to provide some benefit to all.
- **Selective**: Refers to strategies that are targeted at specific subgroups of the population. Selective prevention targets the entire subgroup, programs become more specialized to meet their needs.
- **Indicated**: Includes strategies that are targeted at specific individuals or families. Indicated prevention is specialized and individually tailored to meet the needs of the individual or family.

Return on Investment/ Cost-Benefit Analysis
- **Data** on the return on investment and/or cost analysis has been reported if available.
- **Free** = programs that do not require extra resources or staff time
- **?** = programs without info about cost or return on investment
BABY BOXES

- New parents
- Health and Wellness
- Community
- Level 3

**OVERVIEW:** Community health initiative to provide a box with baby clothing, baby bedding, diapers, hygiene products for infants, and literature on common concerns of new parents. The box itself becomes a sleeping receptacle that has been aimed at reducing sudden infant death syndrome. Tested in multiple states and countries with success in utilization and decrease in infant deaths. Some programs now offering ongoing support to parents in the form on online education and short teaching videos that can be utilized by OB/GYNs, sleep therapists, nurses, and other medical professionals who provide family support in early years.

BABY FRIENDLY HOSPITAL INITIATIVE

- Maternal and infants
- Nutrition and Prevention
- Universal
- Hospital-based
- Level 1

**OVERVIEW:** This initiative was launched by the World Health Organization and United Children’s Fund accredits hospitals so that they can be more baby-friendly and encourage breastfeeding among mothers and children. The BFHI is implemented in 500 hospitals around the country and has shown to be effective in increasing rates of breastfeeding initiation and exclusivity. Cost effective systems change that increases healthy infants rates.
## Healthy Pregnancies

<table>
<thead>
<tr>
<th>PROGRAM NAME</th>
<th>OVERVIEW</th>
<th>POPULATION</th>
<th>TIER</th>
<th>PROGRAM SETTING</th>
<th>E-B RATING</th>
<th>STRENGTHS/OPPORTUNITIES</th>
<th>COST/ROI</th>
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<tbody>
<tr>
<td>Adolescent Parenting Program</td>
<td>Intensive home visiting and peer group education to prevent subsequent pregnancies, improve high school completion, acquire job skills, improve positive parenting skills, and improve self-sufficiency.</td>
<td>First time pregnant or parenting youth aged 12 to 19 with children birth to five years</td>
<td>I</td>
<td>Home and Community based</td>
<td>3</td>
<td>The program has been demonstrated to increase participant’s primary responsibility for housing and utilities, increase higher education enrollment, job stability, and a greater focus on career goals.</td>
<td>?</td>
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<tr>
<td>Baby Boxes</td>
<td>Community health initiative to provide a box with baby clothing, baby bedding, diapers, hygiene products for infants, and literature on common concerns of new parents. The box itself becomes a sleeping receptacle that has been aimed at reducing sudden infant death syndrome.</td>
<td>New parents</td>
<td>U</td>
<td>Community</td>
<td>3</td>
<td>Tested in multiple states and countries with success in utilization and a decrease in infant deaths.</td>
<td>Free</td>
</tr>
<tr>
<td>Baby Friendly Hospital Initiative</td>
<td>This initiative was launched by the World Health Organization and United Children’s Fund and accredits hospitals so they can be more baby-friendly and encourage breastfeeding among mothers and children.</td>
<td>Maternal health/infancy</td>
<td>U</td>
<td>Hospital</td>
<td>1</td>
<td>The BFHI is implemented in 500 hospitals around the country and has shown to be effective in increasing rates of breastfeeding initiation and exclusivity. Has been effective in rural medical centers. Montana has 11 Baby-Friendly Designated Hospitals.</td>
<td>For Hospitals: D1- $0, D2- $4175, D3- $4,200, D4- $4,500. For Free Standing Birth Centers: D1- $0, D2- $3200, D3- $3,000, D4- $3500. Designation valid for 5 years. Annual QI fee- $1,500. Re-designation fee (every 4-5yrs) - $2,975 + on-site travel fees in year 5 + cost of feeding supplies (depends on area and center. See website for an estimation sheet for cost of feeding supplies)</td>
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<td><strong>Children and Recovering Mothers (CHARM) Collaborative</strong></td>
<td>Pilot program in Burlington, VA that created a collaborative system to provide care and support to pregnant women with opioid use disorder.</td>
<td>Pregnant women with opioid use disorders</td>
<td>S</td>
<td>Community</td>
<td>3</td>
<td>SAMSHA recognizes collaborative approaches as a best practice in treating pregnant women with substance use disorder.</td>
<td><strong>?</strong></td>
</tr>
<tr>
<td><strong>Family Foundations</strong></td>
<td>Series of classes delivered before and after birth focused on supporting couples having a baby. Classes cover parent adjustment and self-regulation; co-parenting cooperation and support; and early parenting sensitivity.</td>
<td>Expectant mothers and fathers</td>
<td>U</td>
<td>Community</td>
<td>2</td>
<td>Long-term research in two randomized trials, funded by NIH, has shown that families who used the Family Foundations program experience more positive outcomes than families in the randomly assigned control groups.</td>
<td>Program manager package-$550, group leader manual-$350, class workbooks-$30/couple, DVD series (10 pack)-$645.</td>
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<tr>
<td><strong>Family Spirit</strong></td>
<td>Combines use of community paraprofessionals as home visitors and a culturally focused, strengths-based curriculum. Parents gain knowledge and skills to promote healthy development and positive lifestyles for themselves and their children. 63 lessons taught between pregnancy and the child’s 3rd birthday.</td>
<td>Native teen mothers and their children</td>
<td>S</td>
<td>Home Based</td>
<td>1</td>
<td>Family Spirit has met the highest standard of the Department of Health and Human Services’ HomVEE criteria for an evidence-based early childhood home visiting service delivery model.</td>
<td>Implementation support and training affiliation fee: $9000 (first year, per affiliate), $4000 annually (after one year post-training per affiliate). Family spirit training: $3000 per health educator trainee $4000 per supervisor (minimum of one supervisor required). Observation fee: $60 per day per observer. Service fee $250. New trainee training: $1800/trainee. Refresher training: $1300/trainee.</td>
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<tr>
<td><strong>Nurse-Family Partnership</strong></td>
<td>Pre-birth until the child is two years old, first-time mothers that meet income requirements qualify to have a nurse conduct home visits and offer advice and support.</td>
<td>Prenatal to 2 years and first-time mothers</td>
<td>S</td>
<td>Home based</td>
<td>1</td>
<td>Program is currently operating in Silver Bow, Missoula, Yellowstone, and Hill counties. Research has shown families who participate have higher rates of breastfeeding, child immunizations, as well as decreased rates of child injuries and emergency room visits.</td>
<td>Every $1 spent = $5.70 return on investment Year One Cost Example</td>
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