2014 Research Annual Report

Every Child Succeeds



Division Summary

RESEARCH AND TRAINING DETAILS

mber of Faculty	
Number of Joint Appointment Faculty	1
Number of Research Fellows	2
Number of Support Personnel	13
Direct Annual Grant Support	\$1,308,945
Peer Reviewed Publications	7

CLINICAL ACTIVITIES AND TRAINING

Division Photo



R Ammerman, J Van Ginkel

Significant Accomplishments

Launching Let's Talk Baby™

Every Child Succeeds (ECS) is taking its Let's Talk Baby™ Web App to the next level of testing thanks to the sponsorship of Procter & Gamble. This early language learning tool is designed to promote parent-child interaction and optimize development during the critical period of brain development: birth the age three. The app delivers two weekly activities to a parent's email for viewing on a mobile device or computer. Procter & Gamble provided \$50,000 to develop the prototype app, and the Center for Technology Commercialization at Cincinnati Children's provided support for developing the web platform. An invitation is being sent from Pampers first to 5,000 of its rewards members, then 10,000, and then 30,000 to test the app over a three-month period. Following the pilot test, the app will be updated with the potential to reach 4 million families who are subscribed to Pampers.com

StartStrong Initiative

With three-year grant funding from Bethesda, Inc. and Cincinnati Children's, we are partnering with the Anderson Center and the Perinatal Institute to support the StartStrong Initiative. This community-wide project seeks to become a national model for reducing preterm births and inappropriate emergency department usage, starting with pilot projects in Avondale and Price Hill. The goal is to create a continuum of care, sensitive to the needs of high-risk pregnant women and their infant children. Through better use of heathcare resources, the initiative will improve the future for our community and all of our children. ECS will support the initiative through the use of trained home visitors, community health workers, moms group meetings, and other educational programs.

Community Impact Grows

Since its inception, Every Child Succeeds has served more than 22,000 families and provided nearly 500,000 home visits. Further accomplishments for Every Child Succeeds in the past year include:

- Expanding the role of our Transition Coordinators to increase the percent of children who attend quality preschool.
- Engaging moms in four high-risk communities to support healthy child development and to address social issues.
- Engaging community business leaders for funding and support.
- Receiving a \$324,000 Early Head Start grant to deliver home-based developmental services for 72 low-income families in Cincinnati.
- Building linkages among families, home visitors and physicians' offices through our Medical Home initiative.
- Co-sponsoring, with the Pew Center on the States, the fourth annual National Summit on Quality in Home Visitation in Washington, DC, in February. The Summit had its largest attendance ever, attracting more than 550 people.

Research Highlights

Scientific Advisory Committee Formed

Every Child Succeeds has formed a Scientific Advisory Committee to oversee and advise the scientific and research activities of the organization. Chaired by James M. Greenberg, MD, the Scientific Advisory Committee is comprised of leadership from the ECS Board of Directors, leadership in Cincinnati Children's and the University of Cincinnati College of Medicine, and ECS administrators. It is anticipated that this body will play an important role in guiding the scientific mission of ECS in the coming years.

Significant Publications

Ammerman RT, Putnam FW, Altaye M, Stevens J, Teeters AR, Van Ginkel JB. A clinical trial of in-home CBT for depressed mothers in home visitation. *Behav Ther.* 2013 44(3):359-72.

Mothers participating in home visiting programs often bring with them elevated risk for developing major depression. Depression has potentially devastating effects for mothers and their young children, and undermines the effectiveness of home visiting. Yet, depressed mothers in home visiting rarely obtain effective treatment in the community. This article presents findings from a clinical trial of In-Home Cognitive Behavioral Therapy (IH-CBT). IH-CBT was specifically developed to meet the needs of mothers in home visiting. It is provided in the home by masters level clinicians, focused on the unique issues and challenges faced by new mothers, and leverages concurrent home visiting in order to optimize outcomes. The clinical trial found that mothers who received IH-CBT and concurrent home visiting, relative to those who received home visiting alone, reported decreased depressive symptoms, increased social support, decreased psychological distress, and improved functioning following treatment and at three month follow up. IH-CBT is the first evidence-based treatment for depressed mothers in home visiting programs, and is now being adopted by other states as a result of these findings.

Goyal NK, Hall ES, Jones DE, Meinzen-Derr JK, Short JA, **Ammerman RT**, **Van Ginkel JB**. Association of maternal and community factors with enrollment in home visiting among at-risk, first-time mothers. *Am J Public Health*. 2014 104 Suppl 1:S144-151.

Home visiting is an important intervention to improve maternal-child outcomes through coordination, education,

and emotional support. We conducted a retrospective cohort analysis to evaluate factors associated with referral and enrollment of eligible first-time mothers into Every Child Succeeds from 2007-2009. Results of this study demonstrate the value of linking population and program data to evaluate the reach of home visiting and identifying characteristics of those in the target population that are the most difficult to engage. We found that prenatal referral to home visiting is more likely to result in successful enrollment, indicating the need for strong partnerships and coordination with prenatal care providers. We also observed that lower maternal education and more severely deprived neighborhoods were associated with lack of enrollment after referral, suggesting the need for a multifaceted approach to engaging difficult-to-access populations. As states and communities expand home visiting, ongoing evaluation is critical to ensuring that programs are reaching and engaging the families most in need of services.

Division Publications

- 1. Ammerman RT, Putnam FW, Altaye M, Stevens J, Teeters AR, Van Ginkel JB. A clinical trial of in-home CBT for depressed mothers in home visitation. *Behav Ther.* 2013; 44:359-72.
- 2. Ammerman RT, Putnam FW, Altaye M, Teeters AR, Stevens J, Van Ginkel JB. **Treatment of depressed mothers in home visiting: impact on psychological distress and social functioning**. *Child Abuse Negl*. 2013; 37:544-54.
- 3. Ammerman RT, Putnam FW, Teeters AR, Van Ginkel JB. **Moving Beyond Depression: A collaborative approach to treating depressed mothers in home visiting**. *Zero to Three*. 2014; 35:20-27.
- 4. Goyal NK, Hall ES, Jones DE, Meinzen-Derr JK, Short JA, Ammerman RT, Van Ginkel JB. **Association of maternal and community factors with enrollment in home visiting among at-risk, first-time mothers**. *Am J Public Health*. 2014; 104 Suppl 1:S144-51.
- 5. Goyal NK, Hall ES, Meinzen-Derr JK, Kahn RS, Short JA, Van Ginkel JB, Ammerman RT. **Dosage effect of prenatal home visiting on pregnancy outcomes in at-risk, first-time mothers**. *Pediatrics*. 2013; 132 Suppl 2:S118-25.
- 6. Goyal NK, Teeters A, Ammerman RT. Home visiting and outcomes of preterm infants: a systematic review. *Pediatrics*. 2013; 132:502-16.
- 7. Hall ES, Goyal NK, Ammerman RT, Miller MM, Jones DE, Short JA, Van Ginkel JB. **Development of a Linked Perinatal Data Resource From State Administrative and Community-Based Program Data**. *Maternal and Child Health Journal*. 2014; 18:316-325.

Faculty, Staff, and Trainees

Faculty Members

Judith B. Van Ginkel, PhD, Professor Leadership Field Service Professor

Joint Appointment Faculty Members

Robert T. Ammerman, PhD, Professor (Psychology)

Research Interests Causes and prevention of child abuse and neglect, prevention of behavioral and emotional problems in children, family adaptation to childhood disability and chronic illness, and adolescent drug and alcohol abuse.

Thomas DeWitt, MD, Professor (General & Community Pediatrics)

Research Interests Faculty development and community-based education and research.

Division Collaboration

Dr. Noll is co-investigator on a study of the impacts of treatment of postpartum depression among mothers in home visiting. The focus in this study is on the role of cortisol in children as a biomarker of maternal recovery from depression will inform the field and lead to new approaches to addressing the needs of high risk mothers and their children. (Robert Ammerman PhD, Judith Van Ginkel PhD)

Behavioral Medicine and Clinical Psychology » Jennie G. Noll, PhD

Analyzing data collected as part of funded research studies examining treatment of maternal depression, and determinants of retention in home visiting. (Robert Ammerman PhD, Judith Van Ginkel PhD)

Behavioral Medicine and Clinical Psychology » Chad Shenk, PhD

Analyzing data collected as part of funded research examining predictors of outcome in treatment of maternal depression in mothers participating in home visiting. (Robert Ammerman PhD, Judith Van Ginkel PhD)

Behavioral Medicine and Clinical Psychology » James Peugh, PhD

ECS is working closely with Dr. Mitchell and Innovations in their efforts to establish a community database for children participating in support programs, including home visiting. Funded and directed by Success by Six, a United Way initiative, this database will permit the tracking of children from birth through school age in an effort to identify areas in need of additional resources. (Robert Ammerman PhD, Judith Van Ginkel PhD)

Behavioral Medicine and Clinical Psychology » Monica Johnson Mitchell, PhD

Dr. Altaye is co-investigator and biostatistician on funded research at ECS study retention and adherence in home visiting and treatment of postpartum depression in home visiting. (Robert Ammerman PhD, Judith Van Ginkel PhD)

Biostatistics and Epidemiology » Mekibib Altaye, PhD

ECS and Dr. Kieran Phelan are collaborating on an R01 clinical trial studying the adaptation of an intervention to prevent injury in young children participating in the home visiting. This injury prevention intervention has significant promise for the high risk populations served in home visiting. (Robert Ammerman PhD, Judith Van Ginkel PhD)

James M. Anderson Center for Health Systems Excellence » Kieran J. Phelan, M.D.

ECS and Dr. Lannon are working on efforts to bring breakthrough collaborative methodology to home visiting. This includes a contract with the Ohio Department of Health to launch a learning collaborative among home visiting agencies in Help Me Grow. (Robert Ammerman PhD, Judith Van Ginkel PhD)

James M. Anderson Center for Health Systems Excellence » Carole M. Lannon, M.D.

Dr. Robert Kahn is project director on the StartStrong project, in which ECS is a collaborating partner, to improve birth outcomes in high-risk neighborhoods in Cincinnati. (Robert Ammerman PhD, Judith Van Ginkel PhD)

James M. Anderson Center for Health Systems Excellence » Robert S. Kahn, M.D.

Working to examine contributors to prematurity and responses in the context of home visiting. As part of Dr. Goyal's BIRCHW Award, research is exploring the use of public datasets, medical records, and home visiting data to better understand preterm birth and infant mortality in high risk mothers. (Robert Ammerman PhD, Judith Van Ginkel PhD)

Section of Neonatology, Perinatal and Pulmonary Biology » Neera K. Goyal, M.D., James M. Greenberg, M.D., Eic S. Hall, PhD, and Louis J. Muglia, M.D., PhD

Grants, Contracts, and Industry Agreements

		Total	\$1,308,945
	Current Ye	ear Direct	\$1,308,945
R01 HD 066115	09/28/10-07/31/15		\$504,656
Injury Prevention in a Home Visitat National Institutes of Health	ion Population		
PHELAN, K.			
R01 HD 069431	08/10/12-06/30/17		\$422,097
Engaging Fathers in Home Visitation National Institutes of Health	on: Incorporation of a Co-Parenting Intervention		
R01 MH 087499	08/15/10-06/30/15		\$382,192
National Institutes of Health(-)	·		
Treatment of Maternal Depression	in Home Visitation: Mother and Child Impacts		
AMMERMAN, R.			
Grant and Contract Awards			Annual Direct