

Every Child Succeeds

Division Details

RESEARCH AND TRAINING DETAILS

Faculty	1
Joint Appointment Faculty	2
Research Fellows and Post Docs	2



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Division Highlights

Pregnancy and Infant Development (PRIDE) Study

Through early and sustained parent engagement, home visiting programs aim to ensure healthy offspring social-emotional development. Potentially undermining these efforts are the early adverse environments experienced by mothers and children that can disrupt early development. Emerging evidence points to epigenetics as having a role in 'programming' risk for poor child social-emotional development. However, no research exists within the context of home visiting in which the intervention touches several phases of early development 0-3 years. Prenatal and postnatal exposures to adversity may elicit changes in how a child's genes function (expression), potentially leading to alterations in developmental trajectories, behavior, and even program impact. Through a grant from Cincinnati Children's, Every Child Succeeds partnered with the [Division of Biostatistics and Epidemiology](#) to investigate the relationships between maternal prenatal adversity (e.g., depressive symptoms), neonatal epigenetic differences (e.g., DNA methylation of genes involved in the physiologic stress response), and infant development. The Pregnancy and Infant Development (PRIDE) Study began in 2015 and completed in 2017, enrolling 53 mother-child dyads. Although the study was a pilot, and programs cannot yet integrate findings into practice decisions, preliminary evidence draws attention to factors such as maternal depression that may influence offspring biological risk for poor developmental risk. Further, as home visiting seeks novel approaches to demonstrate impact, better understanding of insidious biological vulnerabilities may provide insight to program effects.

Division Publications

- Goyal NK; Folger AT; Hall ES; Teeters A; Van Ginkel JB; Ammerman RT. [Multilevel assessment of prenatal engagement in home visiting](#). *Journal of Epidemiology and Community Health*. 2016; 70:888-894.

2. Ammerman RT; Mallow PJ; Rizzo JA; Putnam FW; Van Ginkel JB. **Cost-effectiveness of In-Home Cognitive Behavioral Therapy for low-income depressed mothers participating in early childhood prevention programs.** *Journal of Affective Disorders.* 2017; 208:475-482.
 3. Folger AT; Putnam KT; Putnam FW; Peugh JL; Eismann EA; Sa T; Shapiro RA; Van Ginkel JB; Ammerman RT. **Maternal Interpersonal Trauma and Child Social-Emotional Development: An Intergenerational Effect.** *Paediatric and Perinatal Epidemiology.* 2017; 31:99-107.
 4. Shenk CE; Ammerman RT; Teeters AR; Bensman HE; Allen EK; Putnam FW; van Ginkel JB. **History of Maltreatment in Childhood and Subsequent Parenting Stress in At-Risk, First-Time Mothers: Identifying Points of Intervention During Home Visiting.** *Prevention Science.* 2017; 18:361-370.
 5. Goyal NK; Folger AT; Hall ES; Greenberg JM; Van Ginkel JB; Ammerman RT. **Y Home visiting for first-time mothers and subsequent pregnancy spacing.** *Journal of Perinatology.* 2017; 37:144-149.
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