



TO: Chair and Members of the Board of Health

FROM: Dr. Alexander Summers, Medical Officer of Health
Emily Williams, Chief Executive Officer

DATE: 2023 November 16

HEALTHY START HOME VISITING

Recommendation

It is recommended that the Board of Health receive Report No. 73-23 re: “Healthy Start Home Visiting” for information.

Key Points

- The Healthy Start division delivers two home visiting programs, which significantly support the achievement of requirements under the Ontario Public Health Standards (OPHS) Healthy Growth and Development Standard to eligible clients of Middlesex-London.
- Families in Middlesex-London are experiencing risk factors and complex challenges.
- Home visiting is an intervention that aims to optimize newborn and child healthy growth and development and reduce health inequities, laying a positive foundation for a child’s entire life.

Background

Children’s early childhood experiences lay the foundation for their entire lives. From birth to three years of age, children’s experiences can either nurture health and resiliency, or make them vulnerable to poor health and developmental outcomes, influencing their entire life trajectory (Canadian Paediatric Society, 2023). The negative impacts of [Adverse Childhood Experiences](#) and chronic stressors including poverty, parental mental health concerns, and abuse or neglect, can also have an effect beyond the individual and family to all of society. In terms of the financial burden, the Ministry of Health reports “that every \$1 invested in early childhood is equivalent to \$3 spent on school-aged children and \$8 on young adults” (MOHLTC, Mental Health Promotion* Guideline 2018, p. 16)

Home visiting is a public health intervention and critical strategy within an upstream population health approach that aims to optimize newborn and child healthy growth and development and reduce health inequities. The Healthy Start Division delivers two home visiting programs, which significantly support the achievement of requirements under the Ontario Public Health Standards (OPHS) Healthy Growth and Development Standard. Public Health Nurses provide targeted approaches to support families in these home visiting programs.

Healthy Babies Healthy Children (HBHC)

Healthy Babies Healthy Children (HBHC) is a mandatory provincial program funded by the Ministry of Children, Community and Social Services (MCCSS). HBHC provides screening, assessment, and support to families from the prenatal period through the early childhood period, identifying risks to healthy child development and assisting families in areas related to nutrition, breastfeeding, positive parenting, and family well-being.

Since its inception in 1998, the provincial government has committed to fully funding the HBHC program. Unfortunately, this funding amount has not increased since 2015, resulting in significant erosion in capacity to deliver the program as intended due to cost increases including salary and operational and administrative costs. Population growth has also resulted in strained capacity. With MCCSS and Board of Health approval, the MLHU adapted the implementation of the HBHC program in 2020 to modify program eligibility criteria to better align capacity with the highest client need ([Report No. 08-20](#)), as well as shift to a nurse-only model in 2022. From January 1, 2023, to September 30, 2023, the Healthy Families Home Visiting Team supported 322 HBHC families with 1947 completed home visits.

Nurse Family Partnership® (NFP)

Nurse Family Partnership® (NFP) is a more targeted and intensive home visiting program for young, first-time parents experiencing social and economic disadvantage. The length of the intervention spans from early pregnancy (ideally prior to 16 weeks gestation, however enrollment may occur up to the end of 28 weeks gestation) until the child's second birthday. NFP program goals include improving prenatal health outcomes, children's subsequent health and development, and parents' attainment of future goals including economic self-efficacy. NFP includes specified Public Health Nurse education and training as well as standardized visit-to-visit guidelines and materials that can be adapted to meet clients' unique needs. At the MLHU, NFP is funded through municipal and provincial cost-shared dollars. NFP nurses on the Healthy Beginnings Visiting and Group Programs team have supported 43 families with 378 home visits from January 1 to September 30, 2023.

Highlights of Community Need

Between 2016 and 2022, there has been a 7.6% increase in the number of babies born to residents of Middlesex-London, with 5024 babies born in 2022, representing an increase of 354 births over the last 6 years. Data indicates that over time, families in Middlesex-London are experiencing increasing risk factors and complex challenges. The [Public Health Ontario, Risk Factors for Healthy Child Development Snapshot](#) pulls data from completed HBHC screens across the province. In 2022, Middlesex-London reported the highest rates of families in the province who identify concerns about money, require newcomer support, report one or both parents as having a disability that may impact parenting, and do not have a primary care provider. 18.7% of families reported having concerns about money to pay for housing/rent, food, clothing, utilities and other basic necessities (compared to 3.7% provincial average); 10.1% of families reported being new to Canada and lacking social supports or experiencing social isolation (compared to 3.7% provincial average); 7% of families reported one or both parents having a disability that may impact parenting (compared to 1% provincial average); and 14.1% of families reported not having a primary care provider (compared to 5.1% provincial average). Additionally, 30.5% of parents reported experiencing a mental health challenge.

2022 NFP program data shows that at the point of enrollment, 44% of clients reported smoking or vaping, 50% reported alcohol use, and 67% reported cannabis use during pregnancy. Also, 20% reported an annual income < \$25,000, 85% reported concerns with their mental health, and almost 50% reported exposure to intimate partner violence in the past 12 months.

Next Steps

The HBHC and NFP programs will continue to deliver home visiting interventions to families with the highest need in order to achieve optimal child outcomes. This will be operationalized through continued data collection to assess program fidelity and impact. The home visiting programs will continue to ensure that Public Health Nurses have the education and resources in order to impact child development and the ever-increasing complexities of families raising young children in our community.

This report was prepared by the Healthy Start Division.

Handwritten signature of Alexander T. Summers in black ink.

Alexander Summers, MD, MPH, CCFP, FRCPC
Medical Officer of Health

Handwritten signature of E. Williams in black ink.

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