

# Annual report

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# Status

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CLIENTS ENROLLED IN NFP:

252



ACTIVE CLIENTS:

85



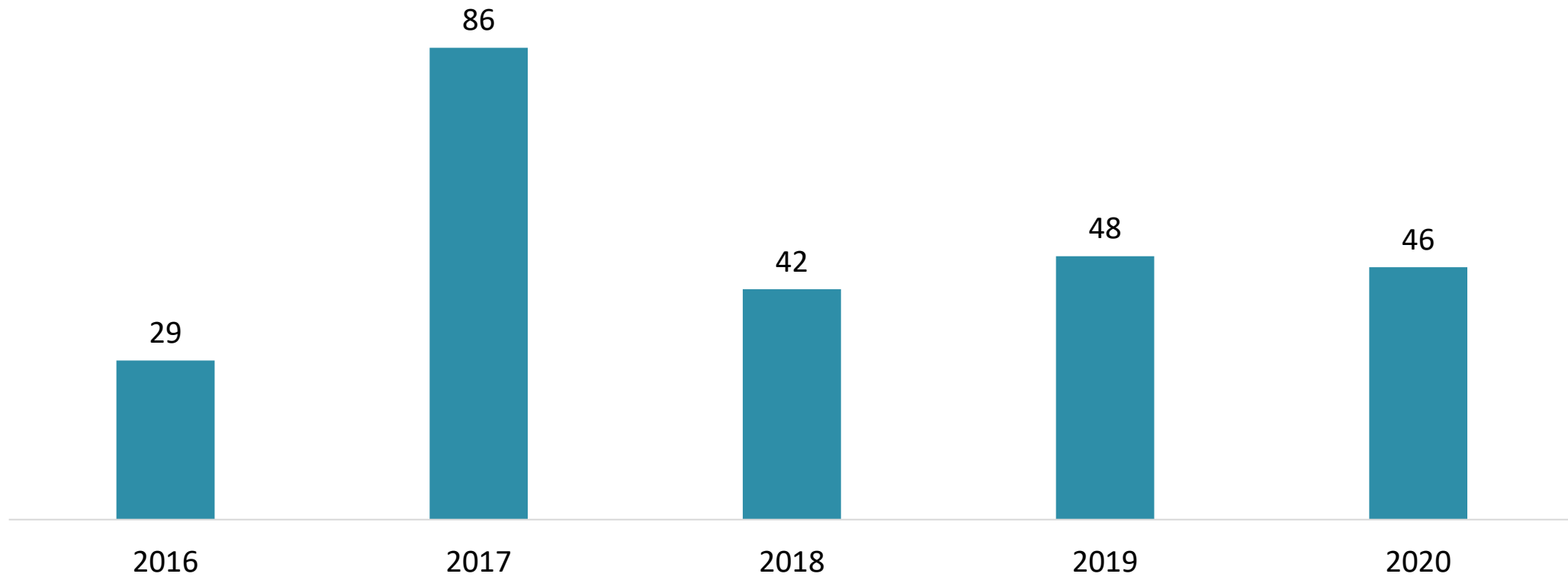
CLIENTS WHO HAVE  
COMPLETED THE PROGRAM:

85



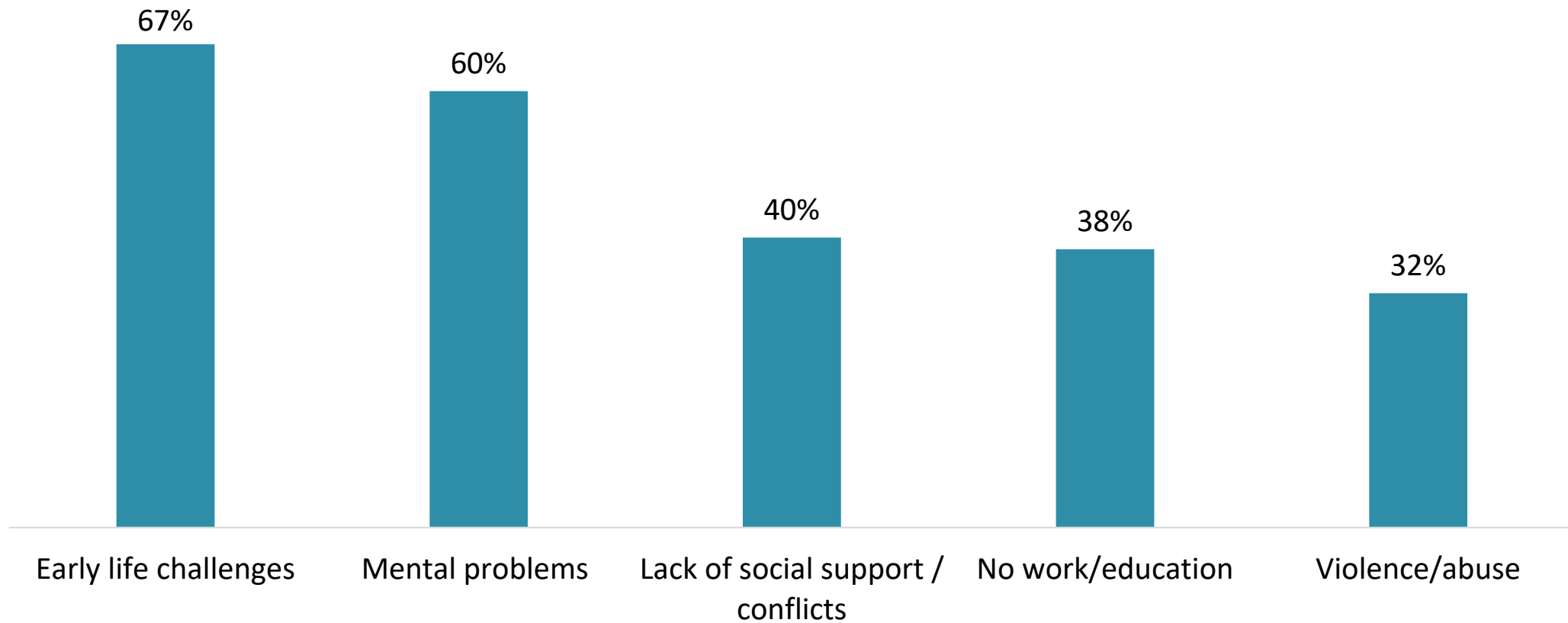
# Enrolment per year

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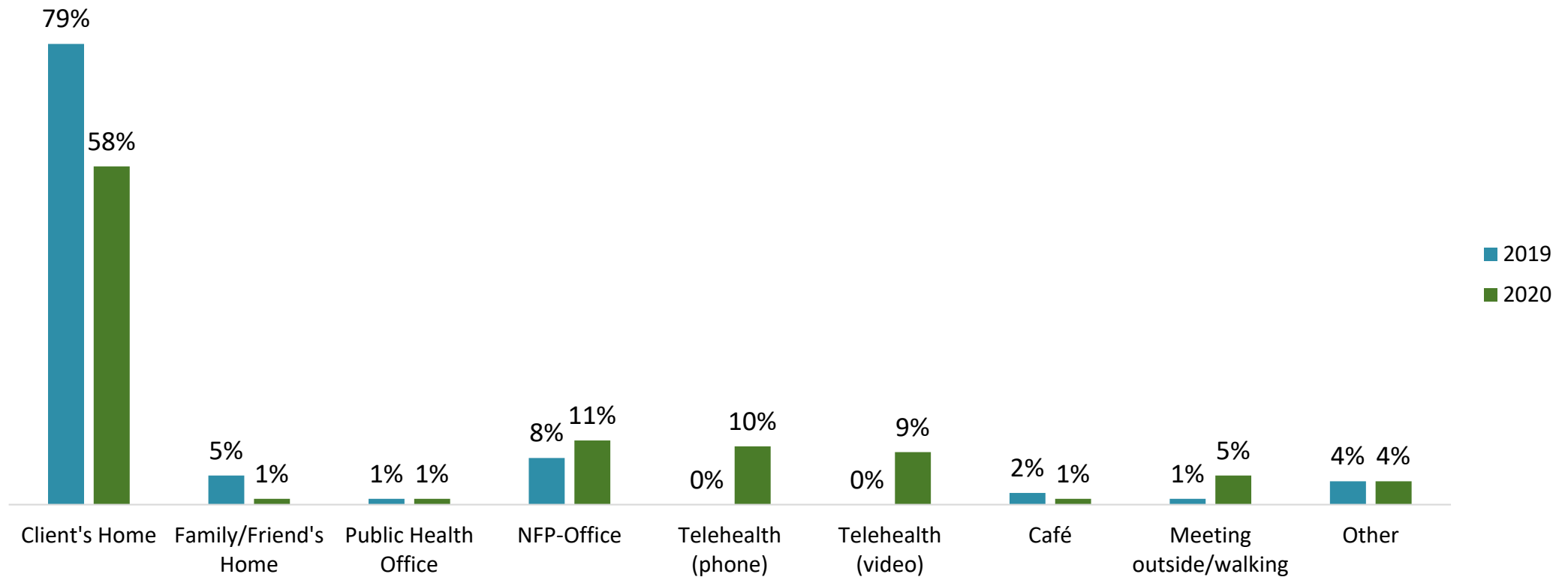


# (The old) inclusion criteria

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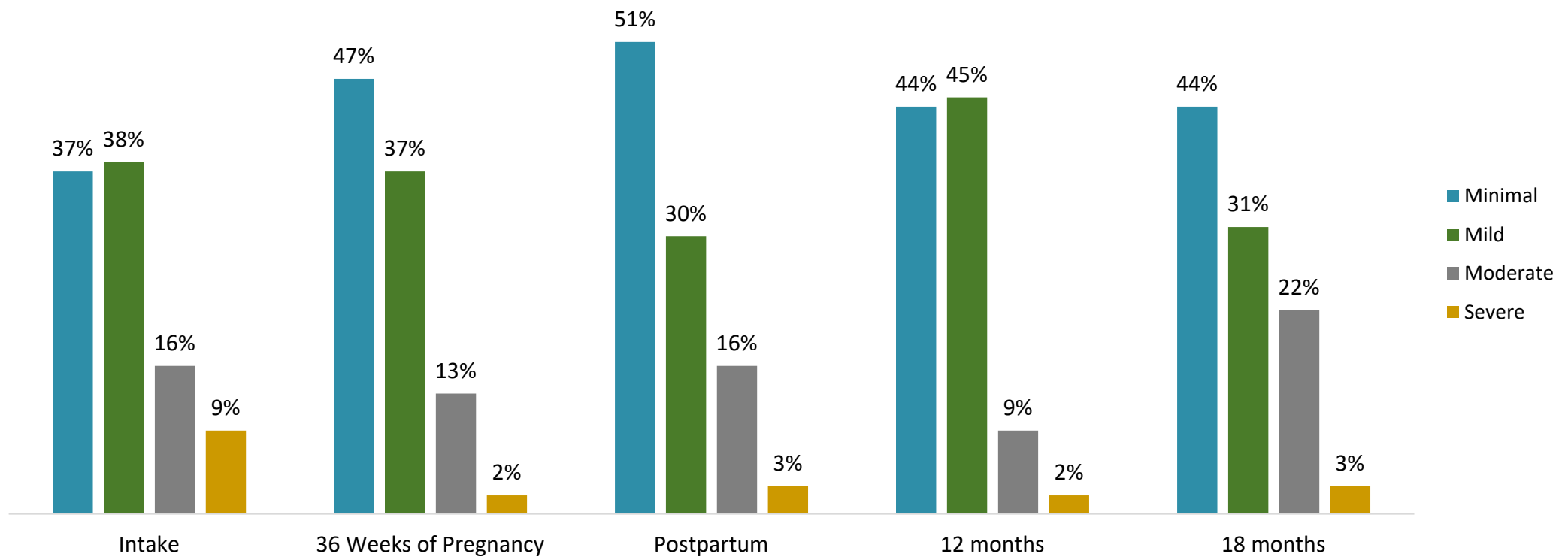
# CME 6: Location of visits



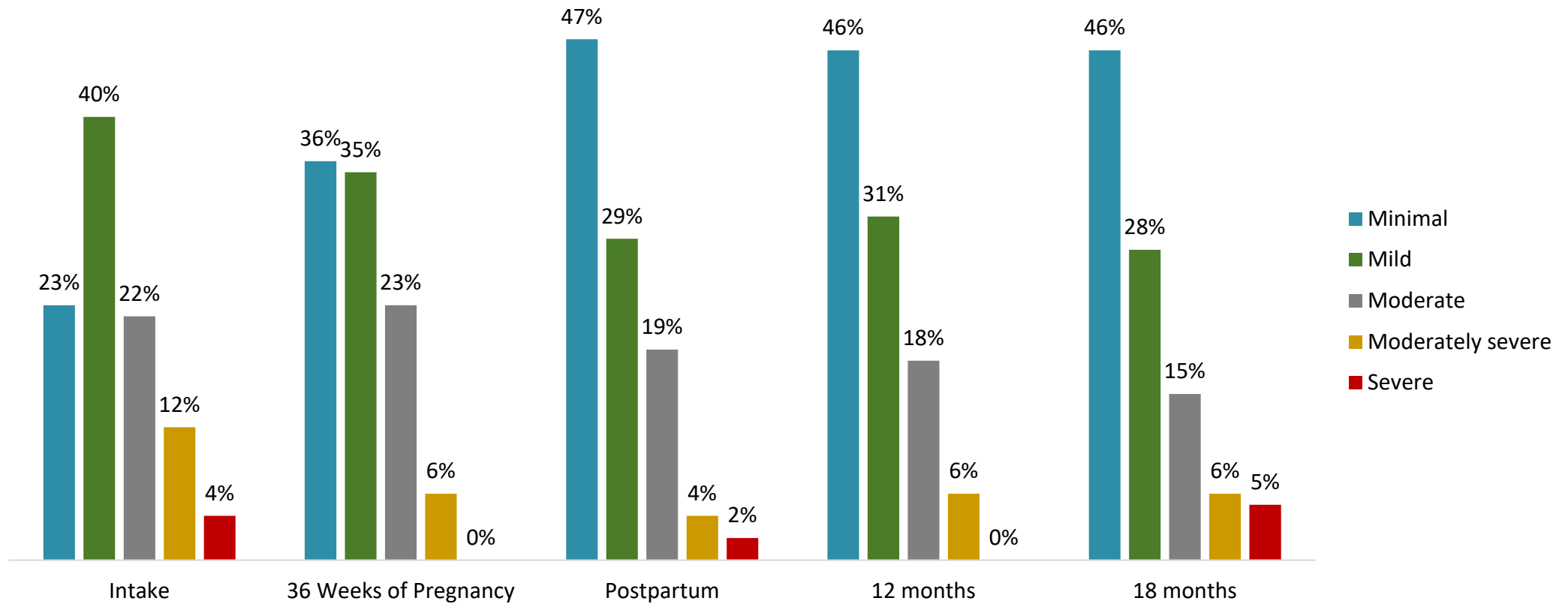
# Maternal mental health

- 60 % of the clients are enrolled in the program because of mental problems
- At intake (self-report):
  - Anxiety: 47 %
  - Depression: 47 %
  - Eating Disorder: 17 %
  - Psychosis: 5 %
  - Other mental problems (OCD, bipolar disorder): 5 %

# Anxiety – GAD-7

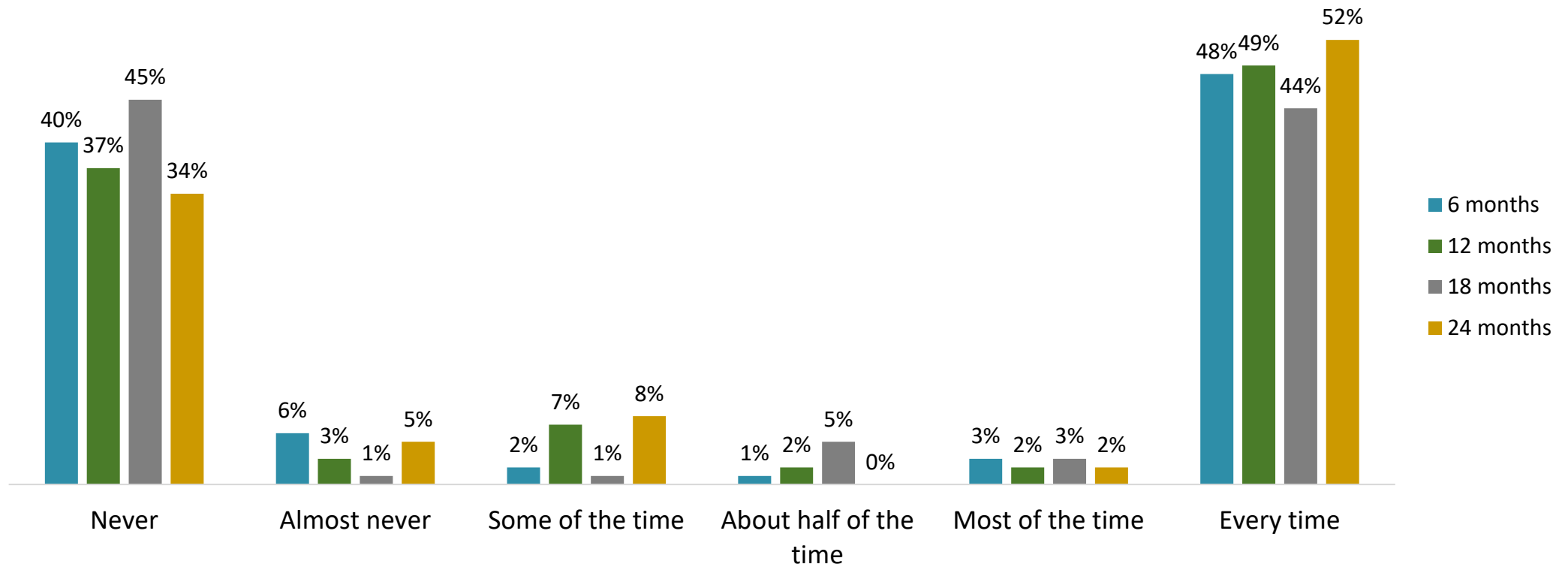


# Depression – PHQ-9





# Contraceptive use



# Subsequent pregnancies

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- 6 months: 4 % have been pregnant again
  - 12 months: 15 % have been pregnant again
  - 18 months: 22 % have been pregnant again
  - 24 months: 32 % have been pregnant again
- 34 pregnancies:
    - 44 % still pregnant
    - 26 % live birth
    - 12 % abortion
    - 18 % miscarriage



# Learning for the future regarding collaboration the child protective services

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- Cooperated with child protective services since beginning. Member in AB, support for teams on regularly basis, one to one cooperation in client cases
- Experience-gatherings with child protection service and psychologist 1-2 times a year. Together because of common function for the teams.
- Based on experience, there has been a need to divide this group, to distinguish between the two professional groups' support functions.
- Works towards a co-operation agreement to ensure common understanding and trust in the co-operation. Maintenance of good cooperation and accountability both ways.



# Learning from the maternal suicide

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## Learnings:

- Important that the support system assists in addition to NFP when needed, such as psychiatric follow-up
- Crisis team and health station quickly in
- Kindergarten for the child
- Network support
- Data form on father, to document and for guidance



# Father involvement

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- Father presence in home visits:
  - Pregnancy: 26 %
  - Infancy: 29 %
  - Toddlerhood: 23 %
- Fathers maternity leave in Norway is extended, compared to many other countries
- No data forms on father, except their presence
- Video feedback and assessment of interaction just for mother-child constellations



# Celebrating successes

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# Revised client eligibility criteria

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1. Experiences of maltreatment, physical or psychological violence, abuse or bullying
2. Involvement with child welfare services in childhood
3. Low family and network social support
4. Persistent or serious conflicts in the relationship or in other relationships
5. Difficulty utilizing relevant services
6. Not currently employed / in training / education and has a low level of education
7. Persistently low income / financial stress
8. Mental difficulties
9. Substance use problems (alcohol, prescription drugs and narcotics)
10. Young mother



# Learning from Covid-19

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- Keeping up program delivery to our clients
- Telehealth
- Important experiences for the future



# Client and family feedback

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# Dyadic assessment approaches and findings, especially EAS and ASQ:SE

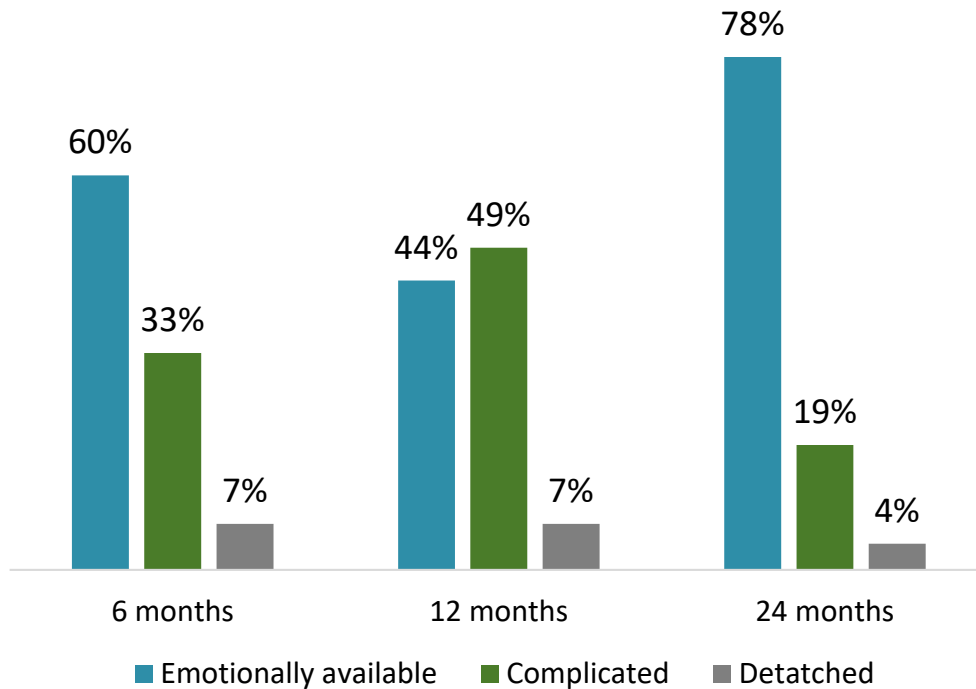
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- ASQ: SE: Screening tools. The mother's assessment of the child
- EAS: Measures the mother and child's interaction based on more objective criteria
- We are satisfied with ASQ and ASQ: SE as a starting point for conversation about the child's development. We are now exploring opportunities to use other questions that are more reflections than check lists
- Coding Interactive Behavior Measure
- DANCE



# Emotional Availability Scales (EAS)

EA Zone - Adult Structuring



EA Zone - Child Responsiveness

