

I Am Shared Safety
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Julia DeChristoforo has served as a public health nurse educator at the [Mabel Morris Family Home Visit Program](#) since 2016. “There is no greater gift,” she says, “than witnessing the growth, development, and resilience of caregivers and their children.”

Currently, in her role as nurse supervisor, Julia reaps the rewards of observing other Mabel Morris home visit nurses learn and grow. An affiliate of the [National Nurse-Led Care Consortium](#) (NNCC), the Mabel Morris Program is a free, voluntary program for low-income parents in Philadelphia with children under age 5. Its goals include educating parents about child development, early detection of delays and health issues, preventing abuse and neglect, and preparing children for school readiness.

Shared Safety recently welcomed NNCC and Mabel Morris into the Coordinating Council. Stephanie Levin, co-chair of Shared Safety’s communications sub-committee, spoke with Julia about how home visit nurses help parents manage transitions – starting a new school year, how nurses help families impacted by intimate partner violence (IPV), and how she thinks Shared Safety can support Mabel Morris’s work.

SL: What tips do you give parents to manage transitions, like starting a new school year? How do home visitors help parents navigate times of uncertainty, like living through a global pandemic?

JD: There is no one right answer to this question, of course, but we talk to families about what has worked for them in the past. We ask a lot of questions in order to tailor interventions to the family’s needs – and to the child’s. Our nurses recognize and celebrate that the caregiver is the expert on their child.

We also hold an annual back-to-school event where we discuss how to adjust to new schedules, how to get cost-effective after-school snacks, and how to create realistic sleep routines. We encourage caregivers to find ways to connect – doing things like reading books together or having dance parties – with their children during times of transition and uncertainty.

SL: How do home visiting programs support child development?

JD: In addition to *all* the work we do to support child development, like annual screenings, exploring the influence of play on learning, and connecting families to supportive resources, our nurses are a mirror – helping caregivers see that *they* are the child’s first and most influential teacher.

SL: How do home visitors help parents and children experiencing IPV?

JD: We routinely screen clients, connect them with advocacy services, and help clients create safety plans; we also have a medical-legal partnership, which has been essential to addressing IPV in the families we serve. Our nurses are in a unique position because they are developing long-term relationships with families; we meet clients where they are and offer unconditional positive regard.

We are also focused on preventing IPV; we help caregivers explore what healthy relationships look like, discover their resiliency, and find support. Nurses are also able to connect caregivers to our in-house mental health clinicians, a new collaboration with the Joseph J. Peters Institute, born out of the overburdened mental health resources in the city.

SL: How will Shared Safety help home visit nurses in your work?

JD: Fewer silos help us better serve our community. More resources, better communication, and increased collaboration enhance the quality of support we can offer to people experiencing IPV. We are excited to be part of Shared Safety.

SL: What do you like to do when you’re not supervising nurses?

JD: I run on iced coffee, hope, sparks of joy, and trying to be the best mom I can be.

This I Am Shared Safety feature was shared in the August/September 2022 Shared Safety Newsletter.

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