



# Department of Defense

## INSTRUCTION

**NUMBER** 6400.05

June 13, 2012

Incorporating Change 1, Effective April 15, 2020

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USD(P&R)

**SUBJECT:** New Parent Support Program (NPSP)

**References:** See Enclosure 1

1. **PURPOSE.** This Instruction, in accordance with the authority in DoD Directive (DoDD) 5124.02 (Reference (a)), reissues DoD Instruction (DoDI) 6400.05 (Reference (b)) and establishes policy, assigns responsibilities, and prescribes procedures for the NPSP, a standardized secondary prevention program under the Family Advocacy Program (FAP) to prevent child abuse and neglect.

2. **APPLICABILITY.** This Instruction applies to:

a. OSD, the Military Departments, the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Combatant Commands, the Office of the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities, and all other organizational entities within the DoD (hereinafter referred to collectively as the "DoD Components").

b. Expectant parents and parents of children from birth to 3 years of age who are eligible to receive treatment in military medical treatment facilities on either a fee-paying or a non-fee-paying basis.

3. **DEFINITIONS.** See Glossary.

4. **POLICY.** It is DoD policy to:

a. Promote resilient families and healthy parenting attitudes and skills to prevent child abuse and neglect and domestic abuse within the DoD.

b. Identify expectant parents and parents of children from birth to 3 years of age whose life circumstances place them at risk for child abuse or neglect.

c. Provide access to voluntary intensive home visitation-based prevention services to all identified at-risk Active Component parents and Reserve Component parents ordered to Federal active duty and their family members to support their roles as DoD personnel and parents.

d. Promote the involvement of both parents, when applicable, in the home visitation-based prevention process.

e. Provide proactive outreach, strengths-based services and education, and support to families facing challenging and stressful conditions related to parenting due to deployment and other military operations.

f. Foster the cross system coordination of military and civilian resources to support parents who may be at risk for child abuse or neglect or domestic abuse.

g. Promote quality, cost-effective NPSP partnerships among the Military Services and between the Military Services and Federal, State, and local agencies and private sector organizations.

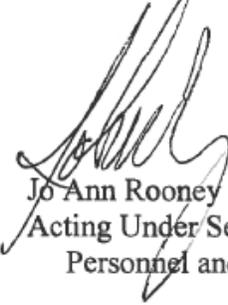
5. RESPONSIBILITIES. See Enclosure 2.

6. INFORMATION COLLECTION REQUIREMENTS. The standardized screening instrument for the NPSP referred to in subparagraph 2.g.(5) of Enclosure 2 of this issuance is exempt from licensing in accordance with subparagraph C4.4.10 of DoD Manual 8910.01 (Reference (c)).

7. RELEASABILITY. **Cleared for public release.** This Instruction is available on the Directives Division Website at <https://www.esd.whs.mil/DD/>.

8. SUMMARY OF CHANGE 1. The change to this issuance updates references and removes expiration language in accordance with current Chief Management Officer of the Department of Defense direction.

9. EFFECTIVE DATE. This Instruction is effective June 13, 2012.



Jo Ann Rooney  
Acting Under Secretary of Defense for  
Personnel and Readiness

Enclosures

1. References
2. Responsibilities
3. Procedures

Glossary

ENCLOSURE 1

REFERENCES

- (a) DoD Directive 5124.02, "Under Secretary of Defense for Personnel and Readiness (USD(P&R))," June 23, 2008
- (b) DoD Instruction 6400.05, "New Parent Support Program," December 20, 2005 (hereby cancelled)
- (c) DoD Manual 8910.01, "DoD Information Collections Manual," June 30, 2014
- (d) DoD Instruction 5400.11, "DoD Privacy and Civil Liberties Programs," January 29, 2019
- (e) DoD 5400.11-R, "Department of Defense Privacy Program," May 14, 2007
- (f) DoD Instruction 1402.05, "Background Checks on Individuals in DoD Child Care Services Programs," September 11, 2015, as amended
- (g) DoD Manual 6400.01, Volume 1, "Family Advocacy Program (FAP): FAP Standards," July 22, 2019
- (h) DoD Instruction 6400.06, "Domestic Abuse Involving DoD Military and Certain Affiliated Personnel," August 21, 2007, as amended
- (i) DoD Instruction 6400.01, "Family Advocacy Program (FAP)," May 1, 2019

ENCLOSURE 2

RESPONSIBILITIES

1. UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS (USD(P&R)). The USD(P&R) shall:

- a. Monitor compliance with this Instruction.
- b. Program, budget, and allocate funds for the NPSP that shall be provided to the DoD Components.
- c. Encourage the use of standardized screening instruments based on empirically determined protective and risk factors associated with child abuse and neglect to identify expectant and new parents whose life circumstances may place them at risk.
- d. Promote the use of a standardized strengths-based assessment process for expectant and new parents whose score on the standardized screening instrument indicates they may be at risk for child abuse or neglect.
- e. Coordinate the management and implementation of the NPSP with Federal, State, and local agencies and private sector organizations, as appropriate.
- f. Urge cost-effective partnerships among the Military Services, and between the Military Services and Federal, State, and local agencies and private sector organizations.
- g. Promote and coordinate joint Service training programs.

2. SECRETARIES OF THE MILITARY DEPARTMENTS. The Secretaries of the Military Departments shall:

- a. Establish Departmental procedures in accordance with this Instruction.
- b. Ensure that NPSP funds received are used only to support the screening, assessment, and provision of home visitation services to at-risk families.
- c. Ensure that commanders and appropriate staff under their command are aware of the availability of the NPSP to active duty parents and of the program's effectiveness in promoting protective factors and reducing risk factors associated with child abuse and neglect.
- d. Ensure that installation procedures and the process for the identification of and response to families whose life circumstances place them at risk for child abuse and domestic abuse are implemented through the installation's Family Advocacy Committee (FAC). In joint-Service

areas, establish a joint NPSP FAC subcommittee to plan, administer, and evaluate the coordination process for a joint NPSP.

e. When applicable, develop strategies that promote the involvement of both parents in home visitation services.

f. Establish quality, cost-effective NPSP partnerships among installations of the same or different Military Services, and between the Military Services and other Federal, State, and local agencies and private sector organizations.

g. Issue policies and procedures for the NPSP that address:

(1) Cross system collaboration and coordination of community resources for early intervention and parenting support.

(2) Administration of a NPSP screening instrument, which uses empirically determined protective and risk factors associated with child abuse and neglect to identify expectant and new parents whose life circumstances may place them at risk.

(3) Administration of a strengths-based standardized assessment process to assess the presence and balance of protective and risk factors impacting expectant and new parents whose score on the standardized screening instrument indicates they may be at risk for child abuse or neglect.

(4) The requirement to assess the presence and balance of protective and risk factors impacting NPSP parents on a continuing basis.

(5) Documentation of screening, assessment, and home visitation-based prevention services to ensure the continuity and quality of care.

(6) Design and implementation of home visiting services that specify dosage (frequency, duration, and length) of services, content of visits (based on a specific curriculum, more general approach, or theory of change), and strategies for building the home visitor and parent working relationship as a vehicle for change.

(7) Compliance with USD(P&R) metric outcome reporting requirements.

(8) NPSP record-keeping requirements that ensure, where applicable, records are maintained in accordance with DoDI 5400.11 (Reference (d)) and DoD 5400.11-R (Reference (e)).

(9) The evaluation of the NPSP home visitation-based prevention process and clinical outcomes.

(10) The safety of NPSP staff during home visits.

(11) Ongoing supervision and training of NPSP home visitors.

h. Every 3 years, at a minimum, conduct an evaluation of the NPSP that includes, but is not limited to, an assessment of the:

(1) Achievement of program outcomes as measured by USD(P&R) and Service performance measures.

(2) Compliance with applicable USD(P&R) and Service directives and standards.

(3) Adequacy of funding and staffing resources to meet NPSP objectives.

ENCLOSURE 3

PROCEDURES

1. REFERRALS

a. NPSP referrals and services are voluntary and shall be available to all eligible parents whose life circumstances have placed them at risk for child abuse whether they live on or off the installation.

b. Parents may refer themselves to the NPSP, or a health care provider, the command, or any other military or civilian agency may facilitate a self-referral to NPSP at the parent(s)' request.

2. TRAINING. NPSP staff shall assist FAP in providing training to commanders, senior noncommissioned officers, health care providers, FAP staff, child care providers, Family Center staff, and community service providers and agencies, when appropriate, to include:

a. The purpose and organization of the NPSP.

b. The identification of protective and risk factors associated with child abuse and neglect and domestic abuse.

c. NPSP referral, assessment, and intervention procedures.

3. SCREENING

a. All eligible parents shall be voluntarily offered NPSP screening for the protective and risk factors associated with the potential for child abuse and neglect.

b. A standardized, empirically validated screening instrument shall be used as an initial tool to identify potential factors that may place parent(s) at risk.

c. When the screening indicates that there is the potential for risk, an in-depth strengths-based assessment of the presence and balance of protective and risk factors associated with child abuse and neglect using standardized measurements shall be offered to the parent(s).

d. NPSP shall assess the presence and balance of protective and risk factors impacting participating parents on a continuing basis.

4. PRIORITIES. Pending funding and staffing capabilities, the priority population in descending order for NPSP services shall be:

- a. Parents assessed by NPSP staff as facing significant risk factors for child abuse and neglect.
- b. Parents whose overall score on the standardized screening instrument does not indicate risk but whose later assessment indicates the presence of high risk indicators and few protective factors.
- c. Parents receiving FAP services for an incident of child abuse or neglect who have had previous NPSP involvement.

5. METHODS. NPSP services shall be provided through:

- a. Intensive home visitation.
- b. Methods sensitive to cultural differences.
- c. A strengths-based family centered developmental approach that promotes protective factors associated with the reduction of risk for child abuse and neglect:
  - (1) Parental resilience
  - (2) Social connections
  - (3) Concrete support in times of need
  - (4) Knowledge of parenting and child development
  - (5) Nurturing and attachment
- d. Methods emphasizing the family's unique strengths, needs and circumstances that promotes the active participation of both parents in all aspects of the program to the maximum extent possible.
- e. Methods facilitating cross system collaboration and referral to other early intervention programs and services to assist families in navigating the many systems that they may encounter.
- f. Procedures to ensure the maximum use of military resources in areas of multiple military installations. A memorandum of understanding (MOU) shall be used to define roles and responsibilities among installation personnel, and one Service shall be designated as the lead agent. The lead agent, in collaboration with the installation FACs, shall ensure that NPSP services are planned, administered, and evaluated in a collaborative manner and in accordance with the local MOU.
- g. Procedures to ensure the maximum effective coordination of home visitation resources when State home visitation programs serve military families. When applicable, MOUs shall be

pursued to define roles and responsibilities among civilian and installation personnel, detail procedures for information and data sharing, and specify referral and continuity of care processes.

6. PERSONNEL. The requirements set out in this section shall be included in all contracts for NPSP services.

a. DoD personnel and contractors who provide social work services as part of the NPSP shall have:

(1) A current, valid, unrestricted clinical license to practice social work or marriage and family therapy independently.

(2) At least 2 years of direct experience in the prevention, intervention, or treatment of child abuse or domestic abuse, or the provision of maternal or child health support services.

b. Registered nurses providing nursing services as part of the NPSP shall:

(1) Have at least a bachelor's degree in nursing.

(2) Have a current unrestricted license in one of the States or U.S. territories.

(3) Have at least 2 years of direct experience in child abuse or domestic abuse, maternal or child health, community health, or mental health.

(4) Be supervised by an independent clinician.

c. All DoD personnel and contractors in the NPSP who provide services to children shall have completed and updated criminal history background checks in compliance with DoDI 1402.05 (Reference (f)).

d. All DoD personnel and contractors in the NPSP shall receive training on:

(1) Identifying and reporting suspected child abuse and neglect and domestic abuse.

(2) Shaken baby syndrome, sudden unexplained infant death, and safe sleeping environments.

(3) Postpartum depression and other mental health issues impacting maternal child health.

(4) The role of attachment in the social emotional development of children and strategies for enhancing bonding and attachment.

(5) Assessing developmental milestones and referral procedures for indicators of special needs or developmental delays.

(6) Assessing and strengthening adaptation to parenthood.

(7) Assessing and strengthening parental capacity for problem-solving, building and sustaining trusting relationships, and seeking help when necessary.

(8) Promoting developmentally appropriate parenting skills and disciplinary techniques, and parent and child communication skills.

(9) Facilitating informal and formal community networks to build positive relationships and reduce social isolation.

(10) Utilizing community-based services and formal and informal community networks to provide concrete support for families who may be in crisis.

(11) Strategies to engage and support the Service member's role in childrearing, especially during separations due to deployment and other military operations.

(12) Methods for screening for, assessing, and addressing protective and risk factors associated with child abuse and neglect using a strengths-based family centered developmental approach.

## GLOSSARY

### PART I. ABBREVIATIONS AND ACRONYMS

DoDD	DoD directive
DoDI	DoD instruction
FAC	Family Advocacy Committee
FAP	Family Advocacy Program
MOU	memorandum of understanding
NPSP	New Parent Support Program
USD(P&R)	Under Secretary of Defense for Personnel and Readiness

### PART II. DEFINITIONS

Unless otherwise noted, these terms and their definitions are for the purposes of this Instruction.

at risk. The presence of risk factors that have been validated through research to be associated with child abuse or domestic abuse and therefore increase the likelihood of child abuse.

child. Defined in DoD Manual 6400.01 Volume 1 (Reference (g)).

child abuse. Defined in DoDI 6400.06 (Reference (h)).

domestic abuse. Defined in Reference (h).

domestic violence. Defined in Reference (h).

FAC. The policy-making, coordinating, recommending, and overseeing body for the installation of the FAP.

family member. Defined in Reference (g).

FAP. Defined in DoD Instruction 6400.01 (Reference (i)).

home visitation. A strategy for delivering services to parents in their homes to improve child and family functioning.

NPSP. A standardized secondary prevention program under the FAP that delivers intensive, voluntary, strengths based home visitation services designed specifically for expectant parents and parents of children from birth to 3 years of age to reduce the risk of child abuse and neglect.

parent. A person who is legally responsible for a child's welfare and with whom the child is living. Such person may be a biological, step-, foster, or adoptive parent or a guardian or other person with power of attorney for the child (including a power of attorney pursuant to a childcare plan for a Service member on active duty) authorized by the child's biological, step-, foster, or adoptive parent or guardian.