

Issue Brief

SEPTEMBER 2005



CHAPIN HALL
CENTER FOR CHILDREN
AT THE UNIVERSITY OF CHICAGO

Engaging and Retaining Participants in Voluntary New Parent Support Programs

BY DEBORAH DARO, KAREN MCCURDY, AND CARNOT NELSON¹

Significant research on the importance of the first few years of life has created a political context supportive of programs that make health, education, and social services more widely available to families earlier in their children's lives. Passage of child health insurance legislation and growth of school readiness programs have both flowed directly from this research. Brain research, and evidence that programmatic outcomes were strongest when intervention started early in children's lives, have had no less profound an impact on the child abuse prevention field which, during the last 15 years, has seen the proliferation of early intervention programs. Indeed, most states now offer some form of social services to new parents shortly after their babies are born.

Although the research has been clear in indicating when to intervene to achieve the best outcomes, it has been less clear in indicating how to engage parents and keep them engaged in services that they find meaningful for their children and that have an impact. The child abuse prevention field has moved to a more universal approach to prevention—that is, offering all new parents early parent support services. However, less consistency has emerged in the ability of programs to keep parents engaged.

In jurisdictions where an initial home visit is offered on a universal basis or to all parents with a certain profile—for example, first-time parents or teen parents—the majority of those offered services do, in fact, accept them and will remain enrolled for at least three months. Although enthusiasm for these services is encouraging, it is equally clear that a significant proportion of those expressing an initial interest either fail to enroll ultimately or accept only a modest level of service. Furthermore, some groups of parents, such as first-time parents or those with limited informal support systems, are overrepresented among those who reject this form of support, viewing such efforts as either intrusive or unlikely to provide useful benefits. Whereas some of these first-time parents may not need assistance, many others might well benefit from access to formal support and ongoing exposure to health and social service professionals. Ensuring that those new parents most in need of assistance actually enroll and remain in parent programs for a sufficient period of time is one of the most longstanding and daunting challenges facing prevention service providers.

1313 EAST 60TH STREET
CHICAGO, IL 60637
TEL: 773-753-5900
FAX: 773-753-5940

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Parents' decisions to participate in a voluntary program are complex and multifaceted, influenced by their own personalities and past experience, as well as by their community context and their impressions of a specific program's staff and offerings. This brief, drawing on analysis of enrollment and retention patterns in one of the country's largest parent support programs, Healthy Families America (HFA), is designed to help program directors better understand the factors that contribute to attracting and retaining the maximum number of new parents in supportive interventions.

Improving Prospects for their Newborns: The Decisive Factor for Parents

For parents, enrollment decisions in home visitation programs are a cost-benefit calculation. And perception of infant risk appears to be the dominant factor in attributing benefits to participating in an intensive new parent support program. Whether in large urban areas, small towns, suburbs or rural communities, mothers who think their babies are at risk for poor developmental outcomes because of low birth weight or placement in a special nursery at birth, are much more likely to enroll in supportive services than mothers whose babies are robust. Offering services during the prenatal period, when expectant mothers may have some concern about the birthing process and the health of their infant, also can improve the likelihood that participants will see benefit in support services and, therefore, accept enrollment offers.

Not surprisingly, many—about a third—of those who do not enroll fail to articulate any concrete benefits from such services. Some mothers who declined to enroll expressed concern about being judged and perhaps punished for maternal failings. Whatever its cause, this failure to enroll should be a source of some concern, particularly for those promoting universal access or targeting the highest risk parents.

Demonstrating Ongoing Benefits to Parents

Keeping parents engaged in a supportive intervention for the time period needed to effect change has been a struggle for many voluntary prevention programs. Although the overwhelming majority (80 percent) of the Healthy Families America parents remained

Voluntary Parent Support Programs **STUDY BACKGROUND**

Goals – To understand more about the specific participant, service provider, program, and community traits that play unique, but interdependent roles in shaping the continuous benefit-cost analysis new parents undertake in determining if they will seek out, enroll, and remain in voluntary parent support programs.

Methods – The study consisted of two parts, a prospective study and a retrospective study. Both parts employed hierarchical linear modeling, a statistical procedure that mapped the extent to which individual, program, and community factors influenced the use of voluntary support services.

Sample – Drawn from participants in Healthy Families America (HFA), a major family support initiative. The retrospective study sample consisted of 815 participants served by one of seventeen HFA programs and the prospective sample consisted of 343 new parents served by nine HFA programs.

enrolled for at least three months, and most stayed for at least half a year, only a minority—a little more than a third—of parents interviewed actually remained enrolled for an entire year. Of those who leave during the first year, most leave during the early months of the program, between five and fifteen weeks. And nearly half of the Healthy Families America parents who left the program before the end of the first year had already been passively refusing services for some time, remaining enrolled largely in name only.

Tangible benefits play a critical role in determining how long parents remain enrolled, and the benefits parents value may change over time. Although home visitation programs are generally appealing to new parents, especially those with at-risk infants, participants do become more discriminating over time. Meaningful assistance is essential to keep parents engaged. Participants who believed family support programs had provided useful information or changed them in terms of how they care for their child or manage their lives were significantly more likely than others to remain for at least a year.

For example, parents with new infants at risk were three times as likely as other Healthy Families America parents interviewed to remain enrolled in programs for three months, but over the course of a year, the calculus of other community supports and resources as well as subjective assessments of the program benefits weigh more heavily in parents' decisions to remain in the program.

Parents in more distressed communities and those with fewer support networks appear more likely than others to perceive benefits to participation. The odds of a Healthy Families America participant remaining in a program for at least six months increased directly with level of community distress and social disorganization: the more distressed their community and the fewer informal supports participants had, the more home visits they were likely to accept. In fact, once enrolled, new parents living in the most distressed communities remained in their respective programs 42 percent longer and received twice the number of home visits as participants who lived in the least stressed communities.

Strong Relationships Key to Deeper Engagement

Successful parent support programs need to do more than simply keep parents enrolled over time. They also need to ensure that they are actively engaged. Although the duration of services is commonly used by funding agencies to determine the extent to which a given grantee is successfully delivering services, this may reflect a program's administrative policy as much as its ability to retain participants in an active and beneficial relationship. Dosage, as opposed to duration, may be the more decisive predictor of engagement levels and eventual outcomes. Other research conducted by Chapin Hall concluded that at least fifteen home visits may be required to reduce maternal depression and improve parental competence among new parents living in highly stressed urban communities. Applying this threshold to the current study population, nearly half of the Healthy Families America participants may not have received enough services to achieve meaningful change, although a majority of these participants were enrolled for a full year.

The quality of the home visitor-participant relationship cannot be minimized in determining whether new parents will establish a long-term commitment to a program and receive a meaningful number of home visits. With the Healthy Families America participants, the more positive the relationship with their home visitor, the more visits they received.

Successfully completing a home visit may indeed hinge, in part, on the worker's ability to engage families in the case planning process and on the family's ability to respond to these types of incentives. Families who believe the nature of their relationship with their worker involved more active participation in the case planning process may also be more likely to be home when a home visitor calls or feel more responsibility to engage in services. When the relationship between parents and the visitor embraces a sense of personal investment on the part of the worker, participants may be more open to the suggestions being made and more inclined to continue formal affiliation with the program. Not surprisingly, participants interviewed who felt this sense of active involvement and personal connection tended to stay longer in the program.

Facing Cultural and Racial Barriers

Race and cultural barriers play a complex but influential role in parents' level of engagement with home visitation services. African American families followed as part of the Healthy Families America study, for example, received significantly fewer home visits even though they technically remained in the program for as long as White participants, a pattern observed in other Chapin Hall research on home visitation programs. In addition to this discrepancy, the HFA sample also identified significant differences in program duration when the participant and home visitor differed in terms of their race. Specifically, African American home visitors experienced a particularly difficult time keeping non-African American parents engaged. Among White or Hispanic parents enrolled in the Healthy Families America programs surveyed, those served by African American providers were significantly less likely to remain enrolled than those served by White home visitors. Among African American families, however, African American workers achieved retention rates comparable to White visitors.

The emergence of race as a significant predictor, both in the number of visits accepted by parents and in their program retention, underscores the importance of understanding how new parents from diverse cultures respond to the concept of new-parent support services. A note of caution is still warranted, however, given the educational disparities between African American and White home visitors within this sample. For the most part, the African American home visitors lacked college or graduate degrees while the White home visitors had either bachelor's or master's degrees. Although the worker's education level per se was not a significant predictor of a new parent's enrollment or retention in services, educational credentials may play a role when a White participant works with an African American home visitor. Workers with formal professional training may be better able to adapt their practice to the unique demands of various racial and cultural groups, and participants may be less likely to focus on the race of their home visitor if they believe the home visitor, by virtue of their formal training, has an important body of knowledge to offer them. In the absence of clear professional qualifications, other factors, such as racial bias and mistrust, may surface as more prominent factors in determining a parent's openness to program enrollment and retention.

Targets of Opportunity

Retention and engagement in parent support programs is fluid and continuously shaped by participants' program experiences, personal networks, and cultural norms. Getting parents to enroll and remain in these programs will require a variety of strategies—more nuanced messages about the benefits of engagement, sustained efforts to address the broad range of needs new parents often express when initially enrolling, more careful assessment of the community context in which services are delivered, attention to the skills needed to build strong relationships between workers and families, and an honest assessment of how racial and cultural factors shape these relationships.

Revise Outreach Strategies

Parent support programs that are successful in engaging and retaining parents will need to craft outreach strategies that get past the initial suspicion and reluctance of

many of those who most need parent support services, and they will need to convey a more compelling message about the tangible benefits of participation because many new parents, especially teens who have had experience caring for siblings, see little difficulty in meeting infants' basic physical needs. In communicating their mission to prospective participants, home visitors and others promoting early intervention services need to clarify that their purpose is not simply to teach parents how to care for their infants. Their primary goal is to ensure that parents are capable of nurturing a broader range of basic needs—that they are able to stimulate learning, nurture language, provide ongoing emotional safety, and find other needed services.

Broaden the Assessment of Needs

Many new parents are initially drawn to these programs out of concern over their infant's well-being, but stay only if they perceive that their own personal needs are being addressed or if they are receiving information they find useful. New parents frequently express a wide variety of concerns that they would not associate with their role as a parent. Early intervention programs can serve as a gateway to services well beyond those that might appear to be directly associated with a potential participant's role as a parent. Although expanding a parenting program's mission or service portfolio to directly address a wider range of issues carries significant risk of losing the focus on parent-child relationships, the ability to conduct accurate assessments of a family's general needs and to provide appropriate referrals to other relevant community service providers may be a critical feature of new-parent efforts, particularly those targeting families facing the greatest economic stress.

Embed Programs in Trusted Community Service Systems

In seeking to expand the availability of early intervention programs, policy makers should therefore pay close attention to the institutional vehicles used to deliver such assistance. Programs will have the greatest success in retaining participants for an extended period of time and delivering a great number of home visits if they are part of a community service system or embedded in family resource centers or community organizations that play a key role in shaping other aspects of a

Summary

TARGETS OF OPPORTUNITY

Change the Outreach Message

- Programs meet parents' needs as well as children's
- Good parenting is more than feeding and changing diapers; nurturing a child takes more than caring for a child

Broaden the Benefits to Parents

- Establish referrals to other resources needed as infants grow

Embed Programs in Trusted Community Organizations

- Offer services in a well-known, easily accessed, and trusted source of other valued community services

Take Race Seriously

- Train all staff thoroughly and continually in sensitivity around cultural differences in parenting practices
- Evaluate race-matching participants and service providers
- Ensure outreach messages are sensitive to their intended audience

Focus on the "Fit"

- Hire for openness and empathy, then train in specific skills
- Encourage balance between respect for participants' perspectives and a clear understanding of a program's structure and objectives

family's life. The limited number of provider-related factors influencing the number of home visits parents receive suggests that how individual workers interact with a family is partially determined by their own characteristics and skills and partially influenced by the organization in which they work. An organization's culture or values may well determine the extent to which home visitation programs actively engage participants in shaping service plans or effectively draw on other community resources in meeting participants' needs. Similarly, participants' perceptions of a home visitation program may well be influenced by their perceptions of the organizations offering the service. If an organization is perceived as embracing the values and norms of the community and respecting local culture, new parents may be more willing to enroll and remain in formal service programs.

Similarly, potential participants may view a family support program as less stigmatizing and more normative if the organization offering such assistance provides broad, generalized support to all local residents as

opposed to targeted support to those experiencing a set of problems such as domestic violence, substance abuse, or mental health issues. Integrating early intervention programs within a community's primary health care system may, for example, offer a more welcoming venue for early intervention services than would public welfare or child welfare providers.

Take Race Seriously

Culture plays a powerful role in shaping parenting choices and notions of appropriate parent-child interactions. Programs must address racial issues systematically as part of their program planning, implementation, hiring, training, and supervision. That does not mean definitively that race-matching is a requirement; it means that systematic attention to cultural issues, broadly defined, is a requirement. Parent support programs that are fluent in cultural differences around parenting and integrate their fluency into their programs from top to bottom are likely to enhance their success.

Focus on the “Fit” Between Participants and Workers

Although the context in which a home visitation program is offered is important, ensuring the skills and competency of those interacting most directly with families is central to the success of relationship-based programs. Repeated evaluations of home visitation programs and other social services indicate wide variation in service quality. These data, and those from the Healthy Families America study, suggest the importance of hiring home visitors competent in the program’s content areas and capable of sustaining relationships with families.

The fit between provider and participant offers a strong incentive to keep families enrolled in the program and to ensure a higher number of home visits. Ensuring this type of fit will require initial training and ongoing supervision that focus on the challenges of participant recruitment and retention. Encouraging home visitors to explore both informal and formal support options with their participants may increase the resources available to families once formal interventions are terminated as well as promote a greater willingness on the part of individuals to both provide and accept offers of assistance. A certain proportion of families enrolled in these services will lack a rich and positive reservoir of informal supports, but many will have such options available to them if they are provided specific encouragement in how to assess and effectively access such resources.

Home visitors might benefit from training on how best to convey a core body of information and set of skills to all participants within the context of offering participants a role in the case planning process. Although home visitors need to respect participants and present information in a manner that demonstrates an understanding of a participant’s particular strengths and limitations, such individualized service decisions need to be framed by a clear structure and understanding of a program’s objectives. To achieve this skill level among its workers, program managers need to establish a clear mission and core set of learning objectives and communicate these objectives to direct services staff through both initial training and ongoing supervision. Just as it is important for parents to hone their ability to make effective judgments and choices with respect

CHAPIN HALL RESOURCES

More information on this study can be found in the final report:

Engagement and Retention in Voluntary New Parent Support Programs, by Deborah Daro, Karen McCurdy, and Carnot Nelson (2005).

Download the final report and this issue brief at:

www.chapinhall.org

Chapin Hall Center for Children at the University of Chicago is a policy research center dedicated to bringing sound information, rigorous analysis, innovative ideas, and an independent multidisciplinary perspective to bear on policies and programs affecting children. Chapin Hall’s focus takes in all children, but devotes special attention to children facing significant problems, including abuse or neglect, poverty, and mental or physical illness. It takes a broad view of children’s needs, including their potential as well as their problems, and addresses the services and supports – public and private – aimed at fostering child and youth development.

to their parenting decisions, home visitors need to have the capacity to make solid, informed choices when it comes to knowing when to accept a parent’s perspective and when to challenge it.

Notes

1. Co-Principal Investigators: Deborah Daro, Chapin Hall Center for Children; Karen McCurdy, Development Human and Family Studies, University of Rhode Island; Carnot Nelson, Department of Psychology, University of South Florida. The principal investigators were assisted by Lydia Falconnier, School of Social Work, University of Illinois, Chicago; and Carolyn Winje, Chapin Hall Center for Children at the University of Chicago. A researcher working directly with each of the study’s program sites facilitated the conduct of this research. These individuals and their affiliations include: Elizabeth Anisfeld and James Sandy, Best Beginnings/Alianza Dominicana, New York City; Aphra Katzev, Bates Family Study Center, Oregon State University; Ann Keim, Cooperative Extension, University of Wisconsin; Craig LeCroy, School of Social Work, University of Arizona; Courtney McAfee, Prevent Child Abuse Georgia; William McGuigan, Penn State University; and Dr. Nelson.