

Variables

Retention 0 – 3 months

Dosage ^a

Intensity^a

12 - 17

18 - 21

22 - 29

Others

Employed

Unemployed

> 30

Program participation

4-6 months

7 - 12 months

13 - 24 months

More than 2 years

Family demographics Mother's age

Relationship status^b

Employment status^b

Less than 12 years

12 years or more

Race/ethnicity^t

Primary language

Above poverty level

Below poverty level

Neonatal (less than one month)

Count of Infant mortality per 1.000 a, e

Households receiving public assistance (%) a, f

Count of Children with a substantiated incident of abuse or neglect neg

N = 1024. a mean (SD). b Number of missing data for respective variable (No information provided):

relationship status (n = 206), employment status (n = 62), education attainment (n = 9),

race/ethnicity (n = 4), poverty level (n = 314), child gender (n = 209), and child age (n = 213). ^c Other in race/ethnicity induded American Indian, Alaskan Native, Asian, multi-ethnicity, and unknown

ethnicity. d Other in primary language included Amharic, Burmese, Farsi, French, Nepali, Somali,

Spanish, and Sudanese. Community-level factors retrieved from the 2012 Kids Count Data Center.

index was developed by sum of median split community-level factors (0 = absent, 1 = present; range

^f Community-level factors retrieved from the 2012 American Community Survey, ^g Community risk

Median population income in the past 12 months (US\$) a, t

Child characteristics Gender^b

Female

Male

Child age

1.000 a, e

Prenatal

1-12 months

13 - 24 months

Over 24 months

Community-level factors

Low birthweight babies (%) a,

Unemployment rate (%) a, f

Community risk index ^{a,g}

Single parent household (%) a,t

White Black

Other

English Other^d

Educational attainment ^b

Living with a main romantic partner

Poverty level below 100% of the federal guideline ^b

Descriptive Statistics for Study Variables



n (%)

436 (42.6)

142 (13.9)

193 (18.8)

156 (15.2)

97 (9.5)

17.47 (18.48)

2.32 (1.19)

125 (12.2)

378 (36.9)

392 (38.3)

129 (12.6)

461 (56.4)

357 (43.6)

263 (27.3)

699 (72.7)

386 (38.0)

629 (62.0)

302 (29.6)

634 (62.2) 84 (8.2)

906 (88.5)

118 (11.5)

167 (23.5)

543 (76.5)

375 (46.0)

440 (54.0)

323 (39.8)

204 (25.2)

223 (27.5)

37 (4.6)

24 (3.0)

0 10 (0 02)

6.71 (2.98)

7.79 (1.78)

24677.01 (4205.16)

0.06 (0.01)

0.36 (0.08)

0.19 (0.08)

3.25 (2.09)

Community and Family Influences on Family Engagement

in Georgia's Maternal, Infant, and Early Childhood Home Visiting Program

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- Objective: To explore the influence of community and family-level factors on observed family engagement outcomes.
- Initial family engagement (> 1 home visit before exit)
- Retention in home visiting (duration)
- Completion of expected home visits (dosage)
- Number of home visits completed over length of retention (intensity)

Outcomes:

- We found that mothers were more likely to engage in home visiting for a longer duration and to complete a greater number of home visits if they:
 - ✓ Lived with a romantic partner
 - ✓ Spoke a primary language other than English
 - ✓ Had a family income above the poverty level
 - ✓ Enrolled when their children were relatively younger
- Further, living in a community with greater disadvantage, <u>independent of a family's socio-economic status</u>, was associated with decreased family engagement outcomes in home visiting.

Hierarchical Regression Results for Family- and Community-level Factors' Effects on Participants' Engagement in Home Visiting

Variables	Retention				Dosage				Intensity			
	Model 1		Model 2		Model 3		Model 4		Model 5		Model 6	
	b	SE	b	SE	b	SE	b	SE	b	SE	b	SE
Family-level factors												
Mother's age	.03	.03	.03	.03	.02	.02	.02	.03	05	.04	07	.04
Relationship status	.14**	.05	.14 ^{**}	.05	.12"	.05	.14	.05	.03	.04	.02	.03
Employment status	.03	.04	.03	.04	01	.04	01	.04	08"	.04	03	.02
Educational attainment	.03	.02	.02	.02	05	.03	05	.03	.01	.01	.01	.01
Race/Ethnicity												
African American	06	.08	08"	.05	09	.08	10	.08	01	.05	02	.07
Other ^a	.05	.13	.05	.13	.08	.12	.08	.12	.05	.07	.05	.08
Primary language	.22**	.03	.22''	.04	.18"	.02	.17"	.02	.02	.04	.02	.04
Poverty level	10*	.05	10"	.05	12	.07	.09*	.06	.02	.04	.01	.05
Child gender	01	.02	01	.02	02	.02	02	.02	03	.03	04	.04
Child age	14**	.04	08"	.04	14"	.04	<mark>14"</mark>	.03	09"	.04	07*	.04
Community-level factor												
Community risk index b	-	-	06+	.03	-	-	10	.03	-	-	09"	.03

N = 1024. Unstandardized coefficients are shown. All variables are standardized by z-transformation (mean = 0 and SD = 1). Caucasian American are used as the reference group for race/ethnicity findings.³ Other in race/ethnicity included American Indian, Alskan Native, Asian, multi-ethnicity, and unknown ethnicity. ^bCommunity risk index was developed by sum of median split community-level factors (0 or absent, 1 = present; range = 0 - 7). ro < 10. ^b r



Georgia Division of Family and Children Services Office of Prevention and Family Suppor







Our guiding conceptual model arose by merging components of three previously described models: the Social Determinants of Health (Healthypeople.gov, 2015), the Intent to Enroll, Enrollment, and Retention in Home Visiting (McCurdy and Daro, 2001), and the Andersen Behavioral Model of Health Services Use (Andersen, 1995).

Methods:

- Study period: January 1, 2012 to September 30, 2015.
- Of the 1,486 families enrolled in home visiting through one of Georgia's seven MIECHV-funded sites, 1,024 were included in our study.
- Families enrolled longer than the study end date were excluded. There were no other eligibility criteria for inclusion in our study.
- Two-level hierarchical linear modeling (HLM) was utilized in our analyses because participants were clustered within counties. Using the HLM analysis command adjust s parameter standard errors for interdependence in the data.
- In models 1, 3, and 5, the influences of familylevel factors on the engagement outcome s were tested.
- In models 2, 4, and 6, the community risk index was included, after controlling for the familylevel factors.

Questions?

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