



**RECRUITMENT, RETENTION &
ENGAGEMENT IN THE
PREPARING FOR LIFE PROGRAMME**

Dr. Orla Doyle

**UCD Geary Institute & UCD School of
Economics**

3rd June 2012

Marie Curie

STRUCTURE OF PRESENTATION

- Brief background to *PFL*
- Recruitment
 - Recruitment strategy
 - Recruitment enhancement activities
 - Population recruitment rate
- Retention/Attrition
 - Pre-intervention attrition
 - Programme attrition & disengagement
 - Factors influencing early attrition
- Engagement
 - Engagement patterns
 - Factors influencing engagement

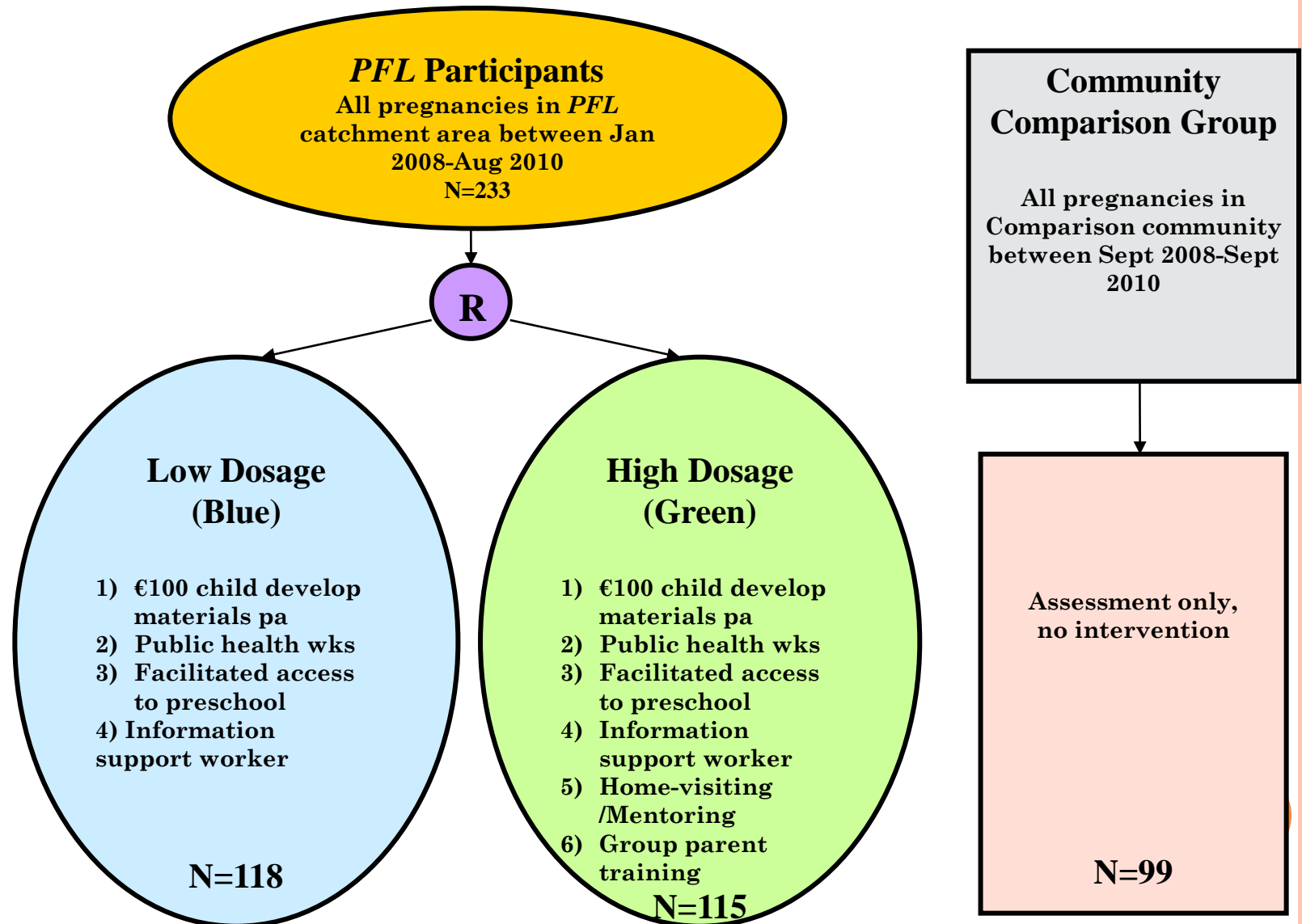


PREPARING FOR LIFE PROGRAMME

- One of the first experimental early childhood intervention in Ireland
- Funded by Irish Government (DCYA) & The Atlantic Philanthropies
- Community-led initiative operated by Northside Partnership in a disadvantaged community in Dublin, Ireland
- **Aim of PFL:** Improve levels of school readiness by assisting parents in developing skills to prepare their children for school



PFL DESIGN



PFL EVALUATION

Impact Evaluation

- **Data collection:** Pre-intervention (baseline), 3 mnts (WASI), 6mths, 12mths, 18mths, 24mths, 3yrs, 4yrs
- **Informant:** Mother is the primary informant, but also fathers, child, other independent data sources (birth records)

Implementation Evaluation

- **Aim:** Delve into the blackbox of programme effectiveness
- **Data collection:**
 1. Implementation data on the Database Management System
 2. Focus groups with participants
 3. Semi-structured interviews with mentors/IO



RECRUITMENT



RECRUITMENT STRATEGY

○ Recruitment

- PFL is a voluntary programme, NO direct referrals

○ Eligibility Criteria:

- Cohort of pregnant women residing in *PFL* catchment area
- Included pre-parious and non-pre-parious women

○ Recruitment Locations:

- Maternity hospital at first booking visit (b/w 12-26 weeks)
- Within the local community

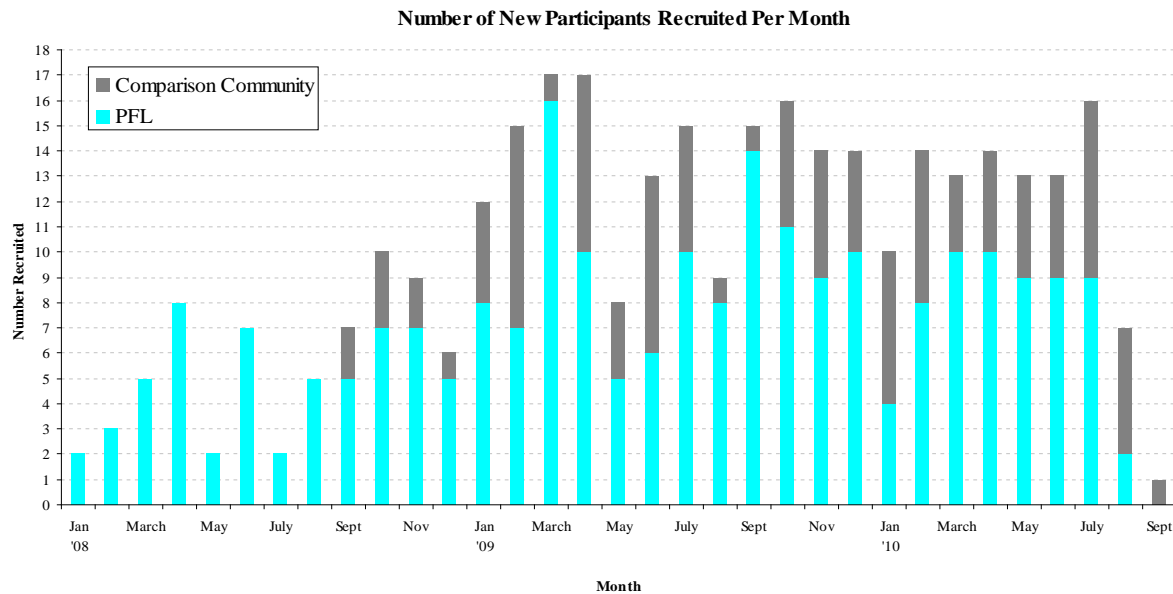
○ Recruitment Duration

- **Anticipated:** 18-20 months based on 80% participation rate
- **Reality:** 32 months (Jan 2008-August 2010)




RECRUITMENT

Number of participants recruited into *PFL* by month of recruitment



RECRUITMENT ENHANCEMENT STRATEGIES: **FOCUS GROUPS**

- 2 focus groups with *PFL* participants conducted in July 2008
 - **Findings:**
 - Participants made the decision to join themselves
 - Factors that encouraged/discouraged participants from joining
 - Encouraged: Benefit to other children; Free materials; support, desire to do the best for their children
 - Discouraged: Invasiveness; Confidentiality; Perception of needing help; length of time
 - Factors that may increase recruitment
 - More information - new posters, more posters
 - Emphasise confidentiality, free materials
 - PFL events - coffee morning etc.
 - Walkers & Talkers
 - Most people recommended the programme to others
- 

RECRUITMENT ENHANCEMENT STRATEGIES: ACTIVITIES (1)

- Distributed leaflets to all households in catchment area
- Distributed leaflets outside local post offices and labour exchange on signing on days
- Posters and information leaflets in– schools, crèches, youth centres, civic centre, city council offices, health centres etc.
- Information desks in local childcare centres on set mornings
- Canvassed parents at school gates in local primary schools
- Attended school & community events i.e. school meetings for incoming parents, open days, sports day, festivals



RECRUITMENT ENHANCEMENT STRATEGIES: ACTIVITIES (2)

- Constantly kept in touch with agencies working with families/children to seek their support
- Held coffee mornings and invited every statutory, voluntary and community agency in the catchment area
- Wore branded tee shirts and coats to create identifiable image
- Held 4 parenting workshops with popular child psychologist
- Recruited Walkers and Talkers
 - Local community people who were on “look out” for any pregnant neighbours and who then encouraged them to join PFL



RECRUITMENT ENHANCEMENT STRATEGIES: **EXPAND CATCHMENT AREA**

- Expanded catchment area: January & June 2009
- Used census data to identify local communities with similar socio-demographics

Measure	Original Catchment Area	1 st Expansion (January, 2009)	2 nd Expansion (June, 2009)	Combined PFL Areas
Inhabitants	6439	3325	5620	15384
Born Outside Ireland	7%	8%	6%	7%
Social Housing	60%	29%	33%	42%
Third Level Education	5%	10%	7%	7%
Unemployment	16%	9%	8%	12%

Source: Small Area Population Statistics, Census 2006

Original Catchment Area: 74% (172/233)

1st Expansion Area: 17% (39/233)

2nd Expansion Area: 9% (22/233)



POPULATION BASED RECRUITMENT RATE

The population-based recruitment rate for the *PFL* cohort, based on all live births during the recruitment phase, was 52%.

- Total Number of Live Births (PHN records): 447
- Total Number Not Interested: 117 (26%)
- Total Number Missed (did not meet): 97 (22%)
- Total Number Recruited: 233 (52%)



RECRUITMENT LOCATIONS

	Hospital Recruitment %	Community Referral %	Total Number Recruited
<i>PFL</i> Cohort	45%	55%	233
Comparison Community	58%	42%	99
Total	48%	52%	332

Recruitment Rate in comparison community:

- 36% (99/278)



COMMUNITY RECRUITMENT

- 129 *PFL* participants recruited from the community
 - 25% recommended by a friend or family member taking part in *PFL*
 - 8% recommended by a friend or family member not taking part in the programme
 - 12% recommended by a *PFL* affiliate or informational material
 - 12% recommended by a medical professional
 - 12% recommended by a local service provider
 - 9% recommended by educational professionals
 - 22% did not indicate that they were recommended to *PFL* by anyone



RECRUITMENT LESSONS

- Start from the largest possible catchment area
- Estimate it will take twice as long as you expect!
- Engage with all agencies in the community
- Run the programme in conjunction with a maternity hospital if starting programme antenatally
- Emphasise flexibility, confidentiality, universal nature of the programme...free stuff...
- Become a real presence in the community



ATTRITION

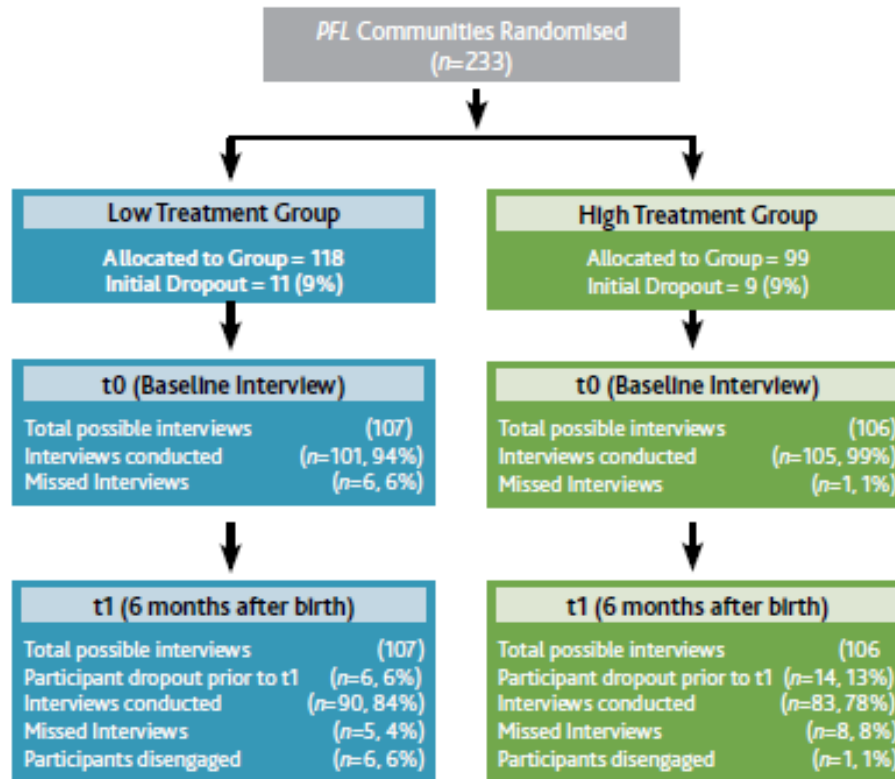


ATTRITION

- Attrition occurs when participants withdrawn from the programme before its completion
- Review of home visiting programme found that 20%-80% of families drop out (Gomby, 2005)
- Attrition undesirable if it is non-random – bias treatment effects
- Individual, family & programme factors may influence attrition (Daro et al. 2003)



PFL SIX MONTH CONSORT DIAGRAM



PRE-INTERVENTION ATTRITION

- Socio-demographic data available for 12 pre-intervention drop-outs

Variable	BL Complete – No BL				
	<i>N</i> (<i>n_{BL}</i> / <i>n_{No}</i>)	<i>M_{BL}</i> (<i>SD</i>)	<i>M_{No}</i> (<i>SD</i>)	<i>M_{BL}</i> – <i>M_{No}</i>	<i>p</i>
Age	127 (115/12)	25.45 (6.17)	23.83 (3.81)	1.62	ns
Family Support	125 (113/12)	3.79 (0.65)	3.50 (0.80)	0.29	ns
Friend Support	121 (109/12)	3.67 (0.64)	3.08 (1.24)	0.59	<.01
Other Support	110 (98/12)	3.92 (0.88)	3.83 (0.94)	0.09	ns
Age Left Education	111 (99/12)	16.87 (1.87)	16.25 (1.14)	0.62	ns
Household Members Working Full Time	126 (114/12)	1.72 (0.90)	1.58 (0.90)	0.14	ns
Household Members Working Part Time	108 (97/11)	1.34 (0.52)	1.18 (0.40)	0.16	ns
Ability to Make Ends Meet	126 (114/12)	3.74 (1.02)	3.75 (0.97)	-0.01	ns



ATTRITION & DISENGAGEMENT UP TO 6 MONTHS

Official dropout between baseline - 6 months:

- High treatment – 13%
- Low Treatment – 6%

Disengagement between baseline - 6 months :

- High treatment – 9%
- Low Treatment – 10%

Attrition appears random up to 6 months

Baseline Characteristics Associated with Attrition/Disengagement

Variables	High Treatment Group p	Low Treatment Group p
Weeks in pregnancy at programme entry	ns	ns
Mother's age	ns	ns
Partnered	ns	ns
Married	ns	ns
Living with parent(s)	ns	ns
First time mother	ns	ns
Low education	ns	ns
Mother employed	-p<.01	ns
Saves regularly	ns	ns
Social housing	ns	ns
Cognitive Resources (WASI) at 3MO	ns	ns
Physical Health Condition	ns	ns
Mental Health Condition	ns	ns
Smoking during pregnancy	ns	ns
Drinking during pregnancy	ns	ns
Drug ever used	ns	ns
Vulnerable attachment (VASQ)	ns	ns
Positive parenting attitudes (AAPi)	ns	ns
Self efficacy (Pearlin)	ns	ns
Self esteem (Rosenberg)	ns	ns
Knowledge of infant development	ns	-p<.01

ENGAGEMENT



PARTICIPANT ENGAGEMENT

- Engagement refers to the amount of services a participant receives
- Varying levels of engagement equate to varying levels of treatment, thus varying levels of programme effectiveness
 - Frequency of home visits found to be associated with better child outcomes (Kahn & Moore, 2010)
- On average about 50% of home visits are not delivered (Gomby et al. 1999)
- Individual factors influencing engagement
 - Ethnicity, maternal age, employment status, marital status, socio-emotional functioning, personality, social support, family risk



ENGAGEMENT IN PFL BETWEEN INTAKE AND 6 MONTHS

- Measure of engagement: duration of mentor contact time with treatment group
 - Contact time includes time in home visits, phone calls, texts, & case notes
 - Recommended: weekly visits of between 30 mins & 2 hours

PFL	Prenatal	0-3	3-6	Total
Delivered no. of home visits	6.29 (4.2)	3.8 (2.4)	3.9 (2.1)	14.0 (6.8)
% of guideline home visits	35.4 (23.5)	29.4 (18.3)	29.6 (16.3)	31.2 (14.2)
Mean duration of home visits	58.3 (21.4)	63.3 (14.7)	59.0 (14.0)	59.3 (13.6)
Total duration of home visits (in hrs)	6.0 (4.0)	4.0 (2.6)	3.9 (2.2)	13.7 (7.0)

BASELINE CHARACTERISTICS ASSOCIATED WITH NO OF HOME VISITS

Variables	p-value
Weeks in pregnancy at entry (-)	p<.05
Mother's age	ns
Partnered	ns
Married	ns
Living with parent(s)	ns
First time mother	ns
Low education	ns
Mother employed	ns
Saves regularly	ns
Social housing	ns
Cognitive resources (WASI) (+)	p<.10
Mental well-being (WHO5)	ns
Vulnerable attachment (+)	p<.05
Self efficacy (Pearlin)	ns
Self esteem (Rosenberg)	ns
Knowledge of infant development (KIDI)	ns
Positive parenting attitudes (AAPI)	ns
Physical Health Condition	ns
Mental Health Condition	ns
Smoking during pregnancy (-)	p<.10
Drinking during pregnancy	ns
Drug ever used (+)	p<.10
Child is a girl	ns



ATTRITION & ENGAGEMENT IN *PFL*

- Attrition relatively low in PFL between BL & 6 months
 - ~10% official & 10% disengaged
 - Lower than other studies yet still early in implementation
- Attrition/disengagement appears unrelated to individual characteristics
- Engagement lower than expected
 - Biweekly and monthly visits are the norm
 - Change in strategy early on
- Socio-demographics unrelated, yet cognitive and psychological resources related to engagement
- Need dosage models to control for non-random engagement patterns



UPDATE ON *PFL*

- Oldest *PFL* child is almost 4 years old & youngest is 13 months
- 18, 24, & 36 month surveys are currently in the field
- 12 month results available during Summer
- Over 1,000 interviews conducted as part of impact evaluation
- Conducted four school readiness surveys with junior infant cohorts in 2008, 2009, 2010, 2011
- Conducted focus groups with low & high treatment groups & semi-structured interviews with all *PFL* mentors
- Evaluation will continue until all children start school

Programme website: www.preparingforlife.com

Evaluation website: <http://geary.ucd.ie/preparingforlife/>



‘PREPARING FOR LIFE’ TEAM

- **Research team:** Dr. Orla Doyle, Eysin Palamaro Munsell, Ailbhe Booth, Maria Cosgrove, Edel McGlanaghy, Caitriona Logue, Keith O’Hara, John Regan, Seong Moon
- **Implementation team:** Noel Kelly, Val Smith, Melanie Murphy, Sarah-Jane Leonard, Sue Cullen, Eva Rigo, Vicki Monkhouse
- **Scientific advisory team:** Prof. Colm Harmon, Prof. James Heckman, Prof. Cecily Kelleher, Prof. Sharon Ramey, Prof. Sylvana Cote, and Prof. Richard Tremblay
- **Expert advisor committee:** Mark Dynarski, Marjorie Smith, representatives from Department of Children & Youth Affairs, and The Atlantic Philanthropies

