

Nurturing Families Network 2012 Annual Evaluation Report

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Nurturing Families Network: 2012 Annual Evaluation Report

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The Children's Trust Fund, Department of Social Services
Hartford, Connecticut

July 17, 2012

We appreciate all the CSR employees, past and present, for their contributions to the research project: Meredith Damboise, Jesenia Maldonado, John Stewart, Katie Coble, Stephanie Messina, Morella Mora, Scott Williams, Janine, Madelyn Figueroa, John Leventhal, and all program staff. Additionally, we would like to thank the Children's Trust Fund, a division of the Department of Social Services, for funding this research. Funds were provided by the Community-Based Child Abuse Prevention Program from the U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. Any opinions, findings, or conclusions herein are, of course, those of the authors and do not necessarily reflect the views of the above agencies or individuals.

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Nurturing Families Network Annual Evaluation Report, 2012 Executive Summary

The Nurturing Families Network, funded by the Connecticut Children's Trust Fund, Department of Social Services is a statewide system of continuous care designed to promote positive parenting and reduce incidences of abuse and neglect. The program focuses on high-risk, first-time mothers and services are initiated at or before birth.

This year's report is divided into 4 sections: NFN Program Overview, 1995-2011; NFN Statewide Annual Evaluation, 2011; NFN Urban Focus, 2011; and Home Visitation for Fathers, 2011. The report provides eligibility data for the 6,414 first-time families screened through the Nurturing Connections program as well as descriptive and outcome data for 2,034 active home visiting participants through the end of the calendar year 2011.

Since 1995, NFN staff have screened over 60,000 first-time families. Thirty-two percent, or 20,208 of these families, have screened at high-risk for maltreating their children and 8,035 families have enrolled in home visiting services in 42 sites across the state. In 2011, 6,414 first-time families were screened by NFN staff, a slight increase from 2010 data (5868 first-time families). There was a slight increase in home visiting participation with 2,034 families receiving NFN home visiting services in 2011 compared to 1,897 in 2010.

Retention data over the past 15 years indicate that on average, 70% of participants stay in the program at least 6 months, 51% stay for at least 1 year, and 33% stay at least 2 years. A total of 392 families have participated the full 5 years since 1995.

Retention rates, on average decreased in 2011 statewide at New Haven sites. Sixty percent of families remained in the program for at least 6 months (compared to 63% in 2010), 41% remained in the program for at least 1 year (compared to 44% in 2010), and 26% remained for at least 2 years (compared to 28% in 2010). Due to several threats to the NFN budget in 2010/2011, many home visitors left their jobs, which may have impacted families to also leave the program. Interestingly, retention rates increased at Hartford sites from 2007 to 2011 (See Figure 8.)

Statewide demographic data - race and ethnicity of parents in 2011 - are consistent with previous reports (2010 data). There are higher rates (percentages) of Hispanic and Black mothers participating in NFN statewide (46% and 20%, respectively) as compared to rates throughout the state of Connecticut; however, in Hartford NFN, Hispanic mothers are overrepresented while Black mothers are underrepresented (63% and 20%, respectively) as compared to rates of Hispanic and Black families in the city of Hartford. In New Haven NFN, the percentages of Hispanic, Black, and White mothers (36%, 34%, and 22%, respectively) are proportionate with rates in city of New Haven.

Thirty-eight percent of statewide participants were teenage mothers and over two-thirds of younger mothers had not yet completed high school when they entered the program in 2011. Over 80 first-time mothers in 5 NFN sites participated in the Support for Pregnant and Parenting Teens (SPPT) program, an NFN collaborative service with the Connecticut State Department of Education.

First-time mothers entering the program in 2011 were socially isolated (27%) and were struggling financially (71%). Outcomes for NFN families statewide in 2011 remain positive.

After two years, employment and education rates increased for participating mothers, as did mothers' use of public assistance. Although mothers are making strides in education and employment, they continue to struggle financially, as evidenced by the increased usage of government assistance over time. Participants showed increases in their knowledge and use of resources in their community after one and two years of program participation. Analyses indicate that NFN participants, specifically those who scored above the cut-off score on the Child Abuse Potential Inventory– Rigidity subscale (CAPI-R), significantly decreased their rigid parenting attitudes over time.

With regards to birth outcomes, specifically low birth weight, prematurity and other serious medical problems, the trends over the past 3 years have fluctuated. Statewide, rates of low birth for NFN mothers for the past 3 years have increased and in 2011 was 12% as compared with 8.1% for the State of Connecticut. Rates of premature births have fluctuated over the past 3 years, with 11% in 2011, 14% in 2010, and 10% in 2009. Rates of NFN children born with serious medical problems have also fluctuated: 13% in 2011, 16% in 2010, and 9% in 2009.

On March 1, 2009, a home visiting program for fathers began in five NFN sites. As of the end of 2011, 91 fathers had participated in the fathering home visitation project among ten NFN sites. Thirty-two percent of these participants were teen fathers and 35% did not have a high school education. Forty-four percent of fathers were employed and 80% were struggling financially. Participating fathers came into the program with positive attitudes toward the role of fathers as measured by the Role of Fatherhood Questionnaire. Conversely, at start-up NFN fathers have very high rigid parenting attitudes as measured by the Child Abuse Potential Inventory, Rigidity Scale. While outcomes for participating fathers are preliminary, they do indicate less rigid parenting attitudes after one year and more community involvement after the first 6 months of program participation.

Introduction

Overview of Report

This report is divided into four sections. The first section, **NFN Program Overview, 1995-2011**, gives a brief description of the evolution and components of the program including Nurturing Connections, Home Visitation, and Nurturing Parenting Groups, and reports on *NFN's aggregate* data for all families who participated in NFN since program inception.

- We compare data across program years on the number of first-time mothers who have been screened for services and present the number of families who received home visitation by program site.
- Participation and retention rates are also compared across program years.
- Analyses of outcome data, specifically change in parents' attitudes and use of community resources over time, is presented for all families who participated in the program since program inception.
- Findings from the examination of abuse and neglect reports (2004– 2009) are also summarized.

The second and third sections report on *NFN's 2011 annual data*. Section two, **NFN Statewide Annual Evaluation, 2011**, reports on data across all program sites statewide. Screening and enrollment for both low-risk and high-risk families are examined.

- Family profiles, including risk factors, social demographic characteristics, household data, education and employment information are described for families receiving home visitation services.
- Data on home visiting program participation, rates of retention, and parent outcomes are analyzed.

Section three, **NFN Urban Focus, 2011**, reports the progress of the ten program sites in Hartford, the first city to go to scale in 2005, and the eight program sites in New Haven, the second city to go to scale in 2007. In these sections, enrollment, descriptive, and outcome data are examined for high-risk families who received home visitation. Enrollment, descriptive characteristics, and outcome data for families participating in home visitation within the Hartford and New Haven NFN sites are presented. We also compare urban data with statewide data on a variety of measures. This is done to highlight differences in demographics that may explain differences in family participation or outcomes.

In the fourth section, **Home Visitation for Fathers**, we describe the fatherhood initiative project that began in 2009. Demographic characteristics and risk profiles are presented for fathers participating in home visitation in ten NFN sites. Data on program participation and outcomes are also presented.

Analyses of data

Where applicable, family profiles, program participation rates, and outcome data are compared across several years showing trends over time. By charting program performance in the same areas over time, the performance history serves as a basis for judgment; that is, prior performance serves as a benchmark for current performance.

In addition, we use a pre-post design and analyze change in the areas that the program is attempting to impact by testing mean scores (or averages) at different points in time for statistical significance using a repeated measures analysis of variance test.

Key findings from analyses are summarized for the following sections: aggregate data across time (since program inception), statewide annual data, Hartford annual data, New Haven annual data, and fathering home visiting.

NFN Statewide System of Care

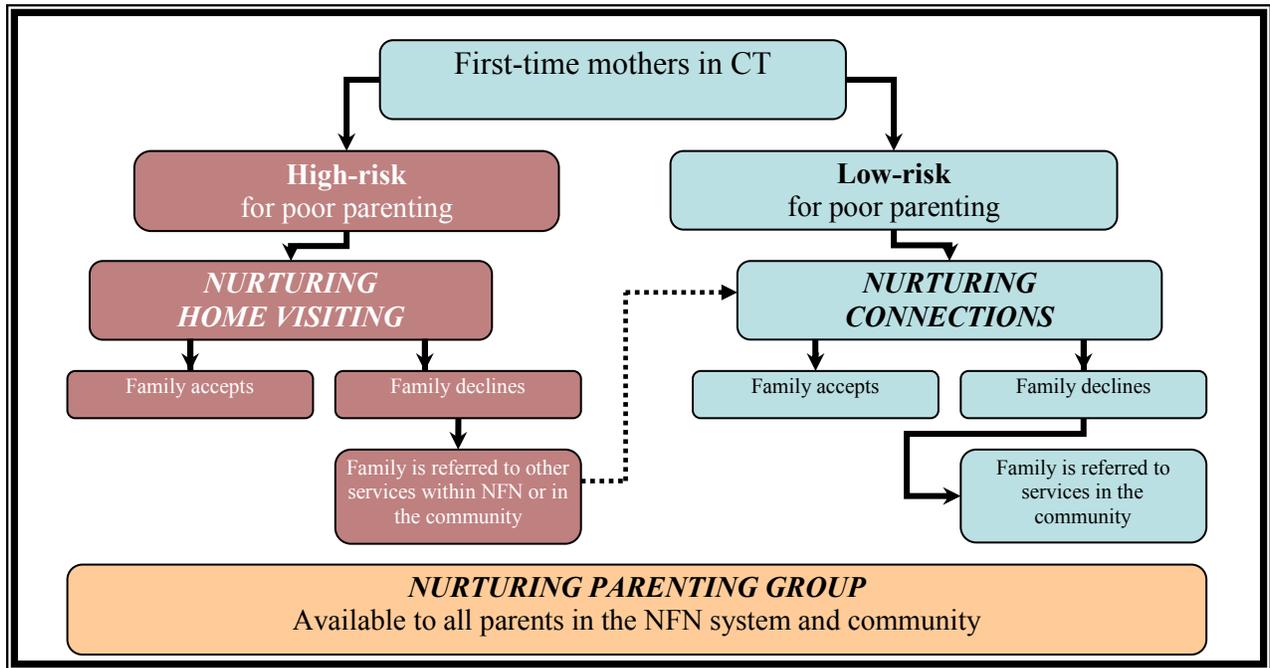


Figure 1. NFN System of Care

The Nurturing Families Network is designed to provide a continuum of services for families in the state. The flowchart illustrates how families enter the NFN system and the various paths they may follow. All NFN services are voluntary, thus there are many steps at which families can either refuse services or be referred to other community services.

NFN Program Components

NFN’s mission is to work in partnership with first-time parents by enhancing strengths, providing information and education, and connecting them to services in the community when needed. It is made up of three components:

- **Nurturing Connections** Nurturing Connections staff conduct the screening of all first-time mothers, identifying parents at low-risk or high-risk for poor parenting and child maltreatment. Nurturing Connections staff also provide telephone support and referral services for low-risk mothers.
- **Nurturing Home Visiting** High-risk families are referred to Nurturing Home Visiting for intensive parent education and support in the home, and home visitors help link families with needed resources and assistance for up to five years.
- **Nurturing Parenting Groups** Community-based parenting education and support groups are offered to all families at various risk levels, including parents who enter the NFN system as well as parents in the community.

Section 1

NFN Program Overview

1995-2011

Program Overview, Summary of Key Findings, 1995-2011

Screenings and Program Participation

The Nurturing Families Network, a system of care that provides a continuum of services to first-time mothers, has expanded its service across the state over the past 16 years. With this expansion there has been a comparative increase in screenings and program participation.

- Since 1995, the NFN program increased from two to forty-two program sites. In 2011 6,414 mothers were screened for services and 2,034 families received home visiting services, a slight increase from 2010.
- Since 1999, a total of 62,345 first-time mothers have been screened for services. Across the years, 1999 to 2011, 32% or 20,208 of the first-time mothers screened were identified as at high-risk for poor parenting.
- A total of 8,035 families identified as high-risk have received home visitation services since 1995. There were 1,267 active home visiting participants at the end of the 2011 program year.

Retention Rates and Outcome Data

- On average, 70% of families participated in the NFN program at least 6 months, 51% for one year, 33% for two years. A total of 392 families have participated the full 5 years since 1995.
- The average involvement in the program, for those families who have had the opportunity to be in the program for five years (1995– 2006), is approximately 20 months since program inception.
- Families who have participated in the program for 1, 2, 3, 4 and 5 years show significant change on measures of rigid parenting and utilization of community resources for each year of their participation.
- Annual maltreatment rates for the years 2004-2009 ranged from 1% to 4%, which compares favorably to the rates provided by other home visiting programs across the country. Prior to Fall 2009, the Children's Trust Fund was under the administrative oversight of the Department of Children and Families, but in late 2009 they were reassigned to the Department of Social Services. Because of this administrative change, we were unable to access the DCF database to determine how many NFN participants had reports between 2009 through 2011.

Nurturing Connections: Screening First-Time Mothers 1999-2011

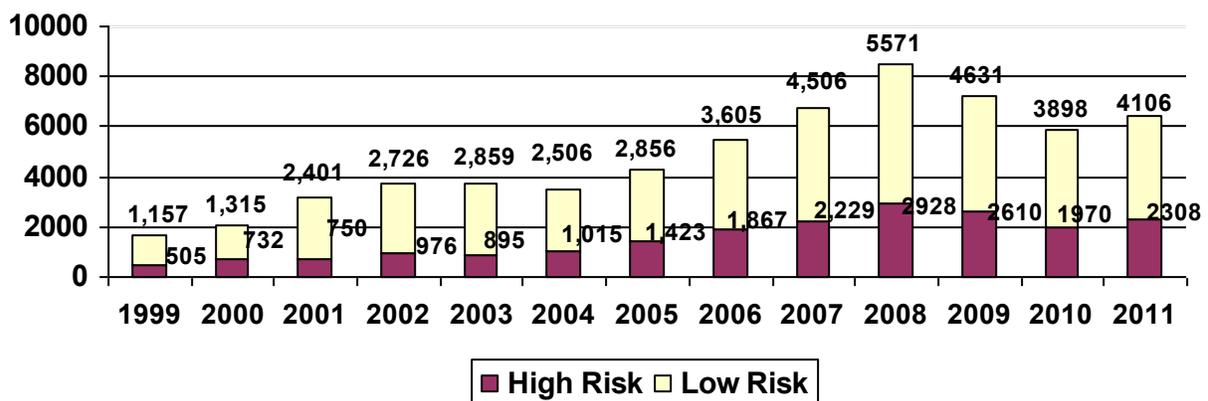
The Nurturing Connections component was first established in 1999 as an initial step in providing universal screening of all first-time mothers in Connecticut. It is currently operating out of all 29 birthing hospitals in the state. Screenings are also conducted in clinics and community agencies, and the goal is to reach as many families as possible at the prenatal stage. As shown, the Revised Early Identification (REID) screen, used to determine eligibility and risks for child maltreatment, consists of 17 items that research has shown increases the probability of child maltreatment. In order to screen positive (i.e., high-risk) on the REID, a person must have either (a) three or more true items, or (b) two or more characteristics if one of them is item number 8, 11, 14, or 15, or (c) have eight or more “unknown” items (i.e., information on at least 8 items is not available).

The percentages of first-time mothers that scored as high-risk by year are as follows: 1999– 30%, 2000– 36%, 2001– 24%, 2002– 26%, 2003– 24%, 2004– 29%, 2005– 33%, 2006– 34%, 2007– 33%, 2008– 34%, 2009– 36%, 2010– 34%, and 2011– 36%. On average, 32.4% of these families have been identified as high-risk. In 2011, 6,414 first-time parents were screened; 4,106 families were identified as low-risk, and 1,970 (36%) families were identified as high-risk.

Figure 2 shows that as the program sites expanded across the state, there has been a comparative increase in screenings. The biggest increases occurred with the expansion in Hartford in 2005, and a similar expansion in New Haven which started late 2007 and into 2008. In 2009, 2010, and 2011, there were decreases in the number of completed screens. This is reasonable, programmatically, due to many sites reaching capacity; majority of program sites do not screen if spaces are unavailable for families.

The Revised Early Identification (REID) Screen for Determining Eligibility
1. Mother is single, separated, or divorced
2. Partner is unemployed
3. Inadequate income or no information
4. Unstable housing
5. No phone
6. Education under 12 years
7. Inadequate emergency contacts
8. History of substance abuse
9. Late, none, or poor prenatal care
10. History of abortions
11. History of psychiatric care
12. Abortion unsuccessfully sought or attempted
13. Adoption sought or attempted
14. Marital or family problems
15. History of, or current depression
16. Mother is age 18 or younger
17. Mother has a cognitive deficit

Figure 2. Number of First Time Families Screened, 1999-2011



Program Sites and Families Served Since 1995

Table 1 shows that by the end of 2011, there was a total of 8,035 families who had received home visiting services at the 42 sites since NFN program inception in 1995. The rate of families served has increased from 6,552 in 2009, 7,123 in 2010 to 8,035 in 2011. (Note that the total number of families served at NFN sites includes 111 families who received services at more than one site. Also note that in 2011, for the first time, one site closed.) As of the end of 2011, there were 1,267 families who were active participants, which is slightly higher than the 1,180 families in 2010. In the Hartford region, 5 of the 10 sites, are among the Family Resource Centers. There is a total of 7 sites in New Haven..

Table 1. Number of Families Served at Each Program Site Statewide			
Program Sites	First Year Offered Services	Number of Families Served	Families Active as of end of 2011
Hartford VNA**	1995	642	60
WellPath (Waterbury)**	1995	590	72
So. Central VNA (New Haven)*	1996	456	34
Bridgeport Child Guidance Center*	1996	567	66
ECHN (Manchester)*	1996	520	46
Lawrence & Memorial Hospital (New London)	1998	227	16
Yale/New Haven Hospital**	1998	405	47
Families Network of Western CT (Danbury)	1998	282	26
Family Strides (Torrington)*	1999	328	37
Generations, Inc. (Willimantic)	1999	265	28
Hartford Hospital	1999	Connections & Group services only	
Family & Children's Agency (Norwalk)	2000	215	37
Madonna Place (Norwich)	2000	261	31
Hospital of Central Connecticut (New Britain)	2000	187	33
Family Centers (Stamford & Greenwich)	2000 & 2006	253	65
St. Francis Hospital**	2000	229	47
Community Health Center (Meriden)	2002	183	39
Middlesex Hospital	2002	149	23
StayWell Health Center (Waterbury)	2002	179	39
Day Kimball Hospital (Putnam)	2005	136	31
Bristol Hospital	2006	86	22
4C's (New Haven)	2006	177	43
Asylum Hill (Hartford)	2005	133	26
El Centro (Hartford)	2005	95	23
Hispanic Health Council (Hartford)	2005	85	23
MIOP (Hartford)	2005	162	41
Parkville (Hartford)	2005	109	27
Village for Families & Children (Hartford)	2005	135	38
Southside (Hartford)	2005	172	29
Families in Crises (Hartford)	2005	109	30
New Milford VNA	2007	41	18
UCONN Health Center (Farmington)	2007	73	15
Community Health Resources (Enfield, Somers)	2007	74	26
City of New Haven Health Department	2007	109	32
Children's Community Programs (New Haven)	2007	93	33
Fair Haven (New Haven)	2007	71	36
Hill Health (New Haven)*	2007	133	Closed 6/2011
St. Raphael's Hospital (New Haven)	2008	104	28
TOTAL		8,035	1,267
* These sites cover two hospitals/service areas			
** These sites have more home visitors than other sites			

Engaging Families

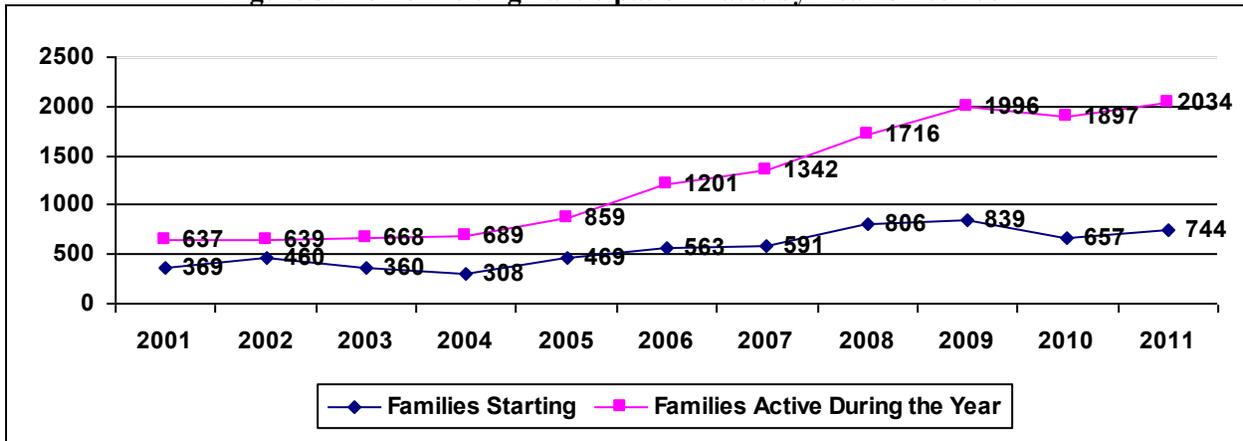
NFN Home Visitation, 1995-2011

Home Visiting Participation by Year Since 2001

As the program sites expanded across the state, there has been a comparative increase in screenings and participation in the home visiting program. Since 1999, a total of 62,345 first-time mothers have been screened for services. Across the years 1999 to 2011, 32% or 20,208 of the first-time mothers who were screened, were identified as high-risk for poor parenting and eligible for home visiting services. Figure 3. shows increased enroll-

ment in Home Visiting with the expansion in Hartford in 2005 and a similar expansion in New Haven in 2007/2008. Since the expansion of 42 sites in 2008, the enrollment in Home Visiting services has steadily increased. However, for the first time, there was a decrease in both families initiating HV and screening families in 2010 (as shown on page 4); and decrease in the total number of families who received services in 2010. The largest active family involvement in services was during 2011.

Figure 3. Home Visiting Participation Rates by Year Since 2001



Program Retention Rates: 6 Months, 1 Year, 2 Years

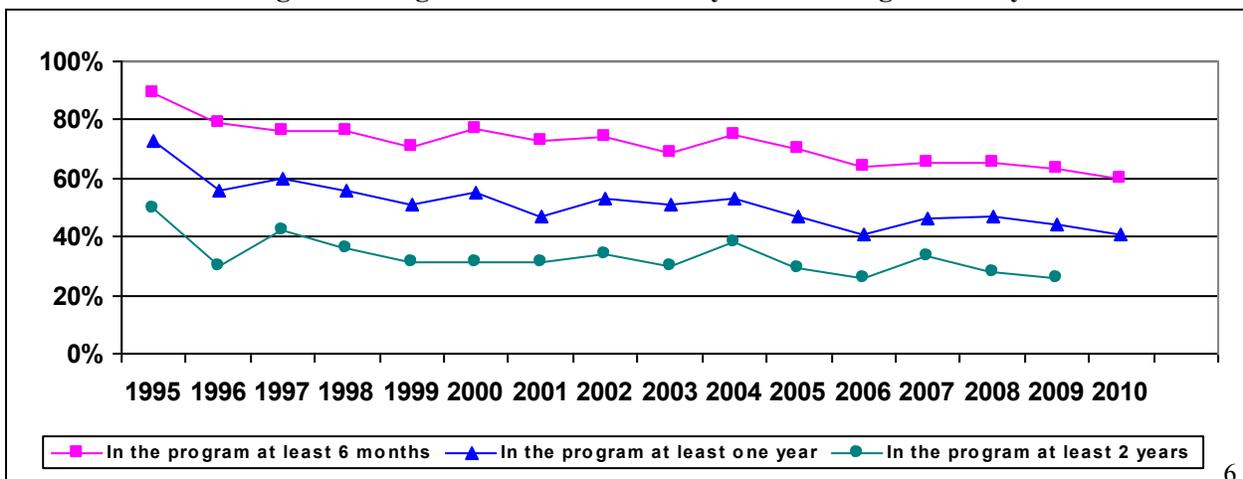
Families participating in Home Visitation services can receive intensive services in the home for up to 5 years.

over 60% of families have remained in the program for at least six months, slightly over 50% of families have remained in the program at least one year, and just over a quarter of families (26%) have remained in the program for at least two years.

Figure 4. shows 6 month, 1 year and 2 year retention rates for each cohort for every program year since program inception in 1995. Starting with the 2005 cohort, there have been a decreasing trend in retention rates. Over the past ten years,

As of 2011, a total of 392 families have graduated from the program (i.e., participated in a 5-year ceremony).

Figure 4. Program Retention Rates by Year of Program Entry



Change in Parenting Attitudes and Utilization of Community Resources Over Time, 1995-2011

In Table 2 we present outcome data on the Child Abuse Potential Inventory– Rigidity subscale (CAPI-R), a self-report standardized instrument designed to measure rigid parenting beliefs, for all families who participated in NFN since program inception in 1995. Data on the CAPI-R were analyzed separately (in a repeated measures analysis of variance) for all mothers who were active for one, two, three, four, and five years and who had completed the CAPI-R for each year that they participated. Consistent with past reports (Damboise & Hughes, 2011) the scores indicate that families showed significant reductions in their risk for abuse/neglect in each annual analysis.

1 Year Capi R (N=2262)	Entry	1 Year				
Rigidity	25.6	21.0***				
2 Year Capi R (N=1130)	Entry	1 Year	2 Year			
Rigidity	25.2	20.9	18.2***			
3 Year Capi R (N=592)	Entry	1 Year	2 Year	3 Year		
Rigidity	24.5	19.8	17.8	17.1***		
4 Year Capi R (N=330)	Entry	1 Year	2 Year	3 Year	4 Year	
Rigidity	25.6	21.3	18.8	18.5	18.1***	
5 Year Capi R (N=174)	Entry	1 Year	2 Year	3 Year	4 Year	5 Year
Rigidity	26.9	21.1	18.1	18.5	17.9	16.5***

* Significant at p<0.05, ** Significant at p<0.01, *** Significant at p<0.001 (repeated measures).

In Table 3, we present outcome data on the Community Life Skills (CLS) scale, an instrument that measures knowledge and use of community resources, for all families who have participated in NFN since 2004 (when the CLS was first introduced). The CLS is broken down into several subscales; transportation, budgeting, support services, support/involvement, interests/hobbies, and regularity/organization/routines. Data on the total CLS were analyzed separately (in a repeated measures analysis of variance) for all mothers who were active for one, two, three, four, and five years and who had completed the CLS for each year that they participated. Significant, positive changes on the CLS at each annual administration indicate families have increase of knowledge and community resource utilization.

1 Year CLS (N=1430)	Entry	1 Year				
Total Score	23.7	25.7***				
2 Year CLS (N=654)	Entry	1 Year	2 Year			
Total Score	23.7	25.8	26.3***			
3 Year CLS (N=324)	Entry	1 Year	2 Year	3 Year		
Total Score	26.1	26.1	26.5	26.9***		
4 Year CLS (N=157)	Entry	1 Year	2 Year	3 Year	4 Year	
Total Score	24.0	26.1	26.5	27.0	27.0***	
5 Year CLS (N=36)	Entry	1 Year	2 Year	3 Year	4 Year	5 Year
Rigidity	24.0	25.9	25.9	26.7	26.5	28.0***

* Significant at p<0.05, ** Significant at p<0.01, *** Significant at p<0.001 (repeated measures).

Rates of Maltreatment for the NFN Population, 2004-2009

Prior to Fall 2009, the Children's Trust Fund was under the administrative oversight of the Department of Children and Families, but in late 2009 they were reassigned to the Department of Social Services. Because of this administrative change, we were unable to access the DCF database to determine how many NFN participants had reports between 2009 through 2011.

Rates of Abuse/Neglect (2004-2009)

We analyzed the Department of Children and Families (DCF) data in two different ways. First, we assessed all families who were active in the program in each year for the past 5 years and who had a report during each year, see Table 4. In 2008/2009, there were a total of 61 reports of maltreatment for 56 NFN participants (5 families had multiple reports) and of those, 13 reports were substantiated.

Table 4. All Reports of Child Maltreatment by NFN Participants

DCF Data on NFN Families	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009
Total number of families that signed DCF release	410	664	614	1,075	807
# of families with DCF Report	45 (11.0%)	55 (8.3%)	53 (8.9%)	63 (5.9%)	56 (6.9%)
# of families with multiple DCF reports	7 (1.7%)	7 (1.1%)	14 (2.3%)	10 (0.9%)	5 (0.6%)
# of families with substantiated DCF report	12 (2.9%)	14 (2.1%)	17 (2.8%)	20 (1.9%)	13 (1.6%)
# of families with more than 1 substantiated DCF Reports	0 (0%)	0 (0%)	2 (0.3%)	1 (0.1%)	0 (0%)
Total number of reports	53	61	69	75	61
Total number of substantiated reports	12	14	19	20	13

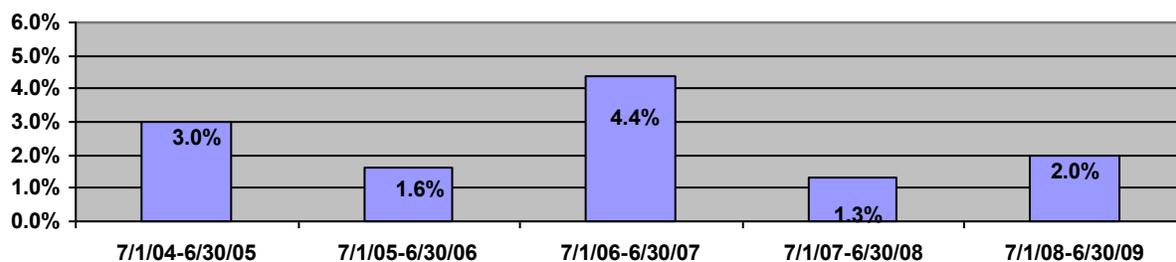
Annual Rates of Maltreatment

In our second analysis, we calculated an annualized rate of maltreatment for families who received services for the entire year for each of the past five years (see Table 5 and Figure 5). NFN families have a slightly higher maltreatment rate in fiscal years 2008 and 2009 compared with the general population of CT at 1.1% (CT Kids Count Data, 2006). The NFN maltreatment rate compares favorably to the rates provided by other home visitation prevention programs across the country, which range from 1% to 8% (Nurturing Families Network Annual Outcome Evaluation Report, 2007) and serve similar populations of high-risk families.

Table 5. Reports of Child Maltreatment for Families Active for the Entire Year

DCF Data on NFN Families	2004-2005	2005-2006	2006-2007	2007-2008	2008-2009
# of families active the entire year	229	256	249	397	447
# of families with DCF report	35 (15.3%)	20 (7.8%)	31 (12.4%)	24 (6.0%)	38 (8.5%)
# of families with multiple DCF reports	6 (2.6%)	3 (1.2%)	11 (4.4%)	5 (1.3%)	4 (0.9%)
# of families with substantiated DCF report	7 (3.1%)	4 (1.6%)	11 (4.4%)	5 (1.3%)	9 (2.0%)
# of families with multiple substantiated DCF reports	0 (0%)	0 (0%)	1 (0.4%)	1 (0.3%)	0 (0%)
Total number of reports	43	23	45	30	42
Total number of substantiated reports	7	4	13	6	9

Figure 5. Annualized Rates of Maltreatment for the NFN Population 2004-2009



Section 2

Statewide NFN Annual Evaluation 2011

In Section 2, we report on screening/enrollment, demographic characteristics, risk profiles, participation and retentions, and program outcomes for NFN statewide (i.e., 41 program sites). Below is a summary of highlights.

Screening and Enrollment

- The total number of families screened for NFN services increased from 5,868 in 2010 to 6,414 in 2011.
- Of the 4,106 families who screened at low-risk, 65% were offered Nurturing Connections phone support and referral services, and 55% of those offered, accepted services (N=1,469).
- Home visiting enrollment data indicate that 56% of high-risk families who were offered home visiting initially accepted services. Of those that accepted, 66% followed through with the Kempe assessment, and 98% of those families then went on to initiate home visiting services (N=743).

Demographic and Risk Profiles

- Data gathered by the home visitors show that the majority (85%) of mothers are single, or never married when they enter the program. Further, 37% of mothers are teenage mothers, 71% experience financial difficulties, 27% are socially isolated, and 18% of mothers have an arrest history.
- Data from the Kempe Family Stress Inventory indicate that 38% of NFN mothers experienced severe maltreatment as children. Additional data from the Kempe also show that NFN mothers are dealing with significant stressors in their lives, such as financial strains, relationship issues, poor mental health, substance abuse, and domestic violence.
- There has been a slight upward trend in the rates of low birth weight for NFN children over the past 3 years while rates of prematurity and other serious medical problems were high in 2010 relative to 2009 and 2011.

Participation and Retention Rates

- Similar to previous years, families received an average of two home visits per month.
- There has been a slight decrease in trends of 6 month, 1 year, and 2 year retention rates for the past 4 years. This is possibly related to program uncertainty or instability due to the challenging state budget during this same timeframe (see also NFN RBA 2012).

Program Outcomes

- Data on the Community Life Skills scale indicate families improve in connecting to others in the community and accessing both financial and social resources.
- Similarly, NFN mothers made statistically significant gains in life course outcomes during the course of their participation in the program. After two years, mothers were more likely to have graduated from high school, be employed, and to live independently of other family members.
- Mothers participating in the program for one and two years, and who averaged at or above the CAPI-R cutoff score, significantly reduced their rigid parenting attitudes.

NFN Program Enrollment, Statewide Data, 2011

In this section, we provide enrollment data for those who screened at low-risk (and participated in Nurturing Connections) and those who screened at high-risk (and participated in home visiting services).

Disposition of Low-Risk Screens in 2011

In 2011, 4,106 (64%) parents out of 6,414 parents were identified at low-risk on the REID screen. Approximately sixty-five percent of those mothers were offered Nurturing Connections telephone support and referral services; and of those offered, a total of 1,469 (55%) parents accepted services.

NFN staff offer the program to families during a face-to-face meeting (generally at the hospital or prenatal clinic), where they describe NFN services and parent voluntary involvement.

As shown in Table 6, the percentage of Nurturing Connections acceptance rates, decreased by five percent from 2007 to 2008 (from 60% to

55%), however has remained consistent across the last 4 years.

Disposition of High-Risk Screens in 2011

- Table 7 provides the enrollment data for the past five years for families who screened at high-risk.
- The percentage of families offered Home Visiting increased 28% from 2007 to 2011 (from 60% to 88%).
- Programmatic changes in the enrollment process starting in 2009 show an increase in % of mothers who accepted home visiting from 2008 to 2009 but a similar % decrease in rates of mothers who completed the Kempe.

- In 2011, 2,308 parents were identified at high-risk on the REID screen, of which 88% were offered home visiting services.

- 56% of those mothers who were offered, accepted services. Two-thirds of those who accepted services were assessed using Kempe Family Stress Inventory (Kempe) assessment, and 98%, or 743, of those who were assessed initiated home visiting services. Relative to the number of parents offered home visiting in the last five years, there has been a slight increase of parents who accepted services.

	2007 N=4506	2008 N=5413	2009 N=4631	2010 N=3898	2011 N=4106
Offered Nurturing Connections	2946 (65%)	3529 (60%)	3095 (67%)	2740 (70%)	2689 (65%)
Accepted Nurturing Connections	1767 (60%)	1804 (55%)	1743 (56%)	1508 (55%)	1469 (55%)

	2007	2008	2009	2010	2011
Number Identified	N=2229	N=2835	N=2610	N=1970	N=2308
Offered Home Visiting	1347 (60%)	2088 (74%)	2105 (81%)	1572 (81%)	2030 (88%)
Accepted Home Visiting	658 (48%)	803 (38%)	1126 (54%)	938 (60%)	1144 (56%)
Received Kempe Assessment	649 (99%)	788 (98%)	805 (71%)	645 (69%)	758 (66%)
Initiated Home Visiting	572 (88%)	729 (93%)	747 (93%)	592 (92%)	743 (98%)
Offered Nurturing Connections	533 (24%)	732 (26%)	779 (30%)	562 (29%)	525 (23%)
Accepted Nurturing Connections	346 (65%)	420 (57%)	390 (50%)	312 (56%)	249 (47%)

NFN Program Enrollment, Statewide Data, 2011, Continued

Barriers to Program Enrollment

There are several reasons for which families who are eligible for home visiting are not offered home visiting:

- Programs are at capacity
- NFN staff unable to have face-to-face contact with mothers while they are in the hospital
- Families have an open DCF case
- Families live outside of the catchment area
- Families speak a different language than NFN staff.

As shown in Table 8, the home visiting program was full in slightly less than two-fifths (38%) of the cases where home visiting was not offered to a high-risk family, lower than the percentage reported for 2010 (54%) and for 2009 (46%) (Damboise & Hughes; 2011). In these cases, home visitors were already conducting between 12-15 home visits per week and could not take any new families. Further, NFN staff could not get face-to-face contact with 21% of families. This often occurs when mothers give birth on the weekend when NFN programs are not screening, or if the mother is not available at the time when the NFN staff is screening. An additional 18% of families were involved with DCF, and therefore not eligible for program services, and 5% of families lived in an area not covered by NFN services. Lastly, in 3% of cases, the family spoke a different language than the NFN staff did. Of the families not offered home visiting, 46% were offered Nurturing Connections services.

In 2011, there were 801 families who were offered home visiting services, but declined. As shown in Table 9, 32% of these families reported that they had enough support and another 29% were not sure if they wanted home visiting. Other reasons for which families did not accept home visiting services in-

Table 8. High-risk Families Not Offered Home Visiting, 2011		N=278
Home visiting was full		38%
Unable to get face to face contact/family discharged from hospital		21%
DCF involved		18%
Out of catchment area		5%
Language barrier		3%
Other		16%
Positive families offered Nurturing Connections		129 (46%)
# families accepted NC		86 (67%)

Table 9. High-risk Families Offered Home Visiting But Did Not Accept, 2011		N=801
Family has enough support		32%
Family not sure if they wanted home visiting		29%
Other member of household doesn't approve		9%
No time for home visits		8%
Family moving		0%
Other		21%
Positive families offered Nurturing Connections		532(66%)
# families accepted NC		249 (47%)

cluded families moving, not enough time for home visiting, and other household members not approving of services. Of the families who declined home visiting services, 66% were offered Nurturing Connections services, and 47% of those offered also accepted services.

Risk Profiles: Mothers' Kempe Scores, Statewide Data, 2011

The Revised Early Identification (REID) screen is used to determine eligibility for home visiting services.

However, data gathered using the Kempe Family Stress Inventory (Kempe) (administered after family accepts services and before home visiting begins) provides a more nuanced profile of participating families.

- As shown in Table 10, the reported highest rates of stress family experienced were exposure to Childhood History of Abuse/Neglect, and Multiple Stresses, with 39% and 38% of mothers, respectively scoring in the severe range. Those scoring in the severe range on the Childhood History of Abuse/Neglect subscale include mothers who were severely beaten, sexually abused, or were raised by more than two families. Those scoring in the severe range on the Multiple Stresses subscale struggle with financial stressors, interpersonal relationships, and significant life changes.
- Over a quarter percent of mothers scored in the severe range on the Low Self-Esteem/Social Isolation/Depression subscale and slightly under a quarter scored in the severe range on the History of Crime, Substance Abuse, Mental Illness subscale.

Total Kempe scores (low, moderate, high, severe risk) are provided by year in Table 11 for the past 4 years. These data show a small amount of variation in level of stress from year to year, with the highest stress shown in 2009

Table 10. Mothers' Scores on the Kempe Family Stress Inventory Statewide Data, 2011	0 Low	5 Moderate	10 High/Severe	
Multiple Stresses (N=665)	20%	41%	39%	
Childhood History of Abuse/Neglect (N=661)	42%	20%	38%	
Low Self-esteem/ Social Isolation/ Depression (N=665)	21%	52%	27%	
History of Crime, Substance Abuse, Mental Illness (N=658)	49%	28%	23%	
Potential for Violence (N=654)	78%	9%	14%	
Child Unwanted/ Poor Bonding (N=660)	20%	72%	7%	
Unrealistic Expectation of Child (N=660)	67%	29%	4%	
CPS History (N=659)	87%	7%	6%	
Harsh Punishment (N=649)	88%	7%	5%	
Negative Perception of Child (N=630)	87%	11%	2%	
Mean total score	29.14			
Table 11. Mothers' Total Scores on the Kempe Family Stress Inventory, Statewide Data, 2008– 2011	2008 N=749	2009 N=773	2010 N=645	2011 N=669
Low Risk (0-20)	40%	33%	34%	35%
Moderate Risk (25-35)	35%	34%	36%	37%
High-risk (40-60)	22%	30%	28%	25%
Severe Risk (65-100)	2%	3%	3%	3%

mothers.

Families at Acute Risk

Within the NFN population of high-risk families, there is a subgroup of participants who are experiencing particularly acute levels of risk. NFN policy defines a family facing acute stress as one that is experiencing an unaddressed mental health problem, untreated substance abuse, or an episode of domestic violence. When a family is experiencing acute stress, the NFN clinical supervisor and home visitor attempt to link the family with appropriate services and, based on the family's responsiveness with those additional services, decide if the family is still appropriate

for NFN home visiting services. In 2011, 7% of families were experiencing acute stress when they entered home visiting (data not shown here). This is one percentage higher than data reported in 2010 (6%) and over double the percentage reported for 2009 (3%). At program entry, families experiencing acute mental health was noted most often, followed by domestic violence, then substance abuse. Further, 7.6% of all NFN families were experiencing acute stress at some point in the 2011 year. Acute untreated mental health, followed by domestic violence, then untreated substance abuse were cited as reasons for experiencing acute stress.

Home Visitation Families at Program Entry Statewide Data, 2011

Mothers' Household and Demographic Information

Home visitors document families' demographic characteristics within the first month of program services. These data are presented in Tables 12, 13, and 14.

- 41% of participating home visiting mothers were screened prenatally in 2011.
- Participants were living with their mothers in 38% of families.
- Fathers/partners were living in 45% of the households.
- As reported by the mothers at program entry, 65% of

Families Screened Prenatally (N= 737)	41%
Mother's Marital Status (N=742)	
Single, never married	85%
Married	12%
Divorced, separated, widowed	3%
Mother's Race/Ethnicity (N=740)	
White	25%
Black	20%
Hispanic	46%
Other (e.g., multi-racial)	9%
Mother Age at Baby's Birth (N=543)	
Under 16 years	5%
16-19 years	32%
20-22 years	25%
23-25 years	15%
26 years and older	23%
Median Age	22 years
Maternal Grandmother Living in the Household (N=727)	38%
Father Living in the Household (N=727)	45%
Father's Involvement With Child (N=426)	
Very involved	65%
Somewhat involved	12%
Sees child occasionally	6%
Very rarely involved	2%
Does not see baby at all	15%

fathers (residing with mother or not) were very involved with their NFN child and another 12% were somewhat involved.

- As with former years, NFN families are racially diverse with Hispanic families representing the largest racial/ethnic group (46%), followed by Whites (25%), Black (20%), and Multiracial or Other (9%) such as West Indian or Pilipino.

Mothers' Social/Risk Factors

- As shown in Table 13, home visitors considered 71% of mothers to have financial difficulties and 27% to be socially isolated at time of program entry.
- 18% of mothers in the Home Visiting program had an arrest history.
- 10% of households received Temporary Assistance for Needy Families (TANF) at program entry, a slight decrease from 11% in 2010.
- 31% of mothers received Food Stamps at program entry very similar to 30% in 2010.

Table 13. Mothers' Social Problems/Risk Factors, 2011

Mother's Social Isolation, Arrest Histories, and Financial Difficulties	2011
Mothers socially isolated (N=694)	27%
Mothers with arrest history (N=693)	18%
Mothers with financial difficulties (N=698)	71%
Households receiving TANF (N=740)	10%
Mothers receiving food stamps (N=563)	31%

Mothers' Pregnancy & Birth Information

- Health data in Table 14 indicate that 13% of NFN children were born with serious medical problems, a slight decrease in the rate as reported in 2010 (16%).
- 10% of the mothers smoked cigarettes during pregnancy, an increase from 2010 (7%).
- 11% of NFN children were born premature, which is slightly less than the rate in 2010 of 14%.
- 12% of NFN children had a low birth weight, which is higher than the state rate of 8.1% (*Connecticut Vital Statistics Report, 2007*), an increase from 2009 (9%) and 2011 (11%).

Table 14. Mothers' Pregnancy & Birth Information, 2009-2011

	2009 N=619	2010 N=533	2011 N= 632
Mother smoked cigarettes during pregnancy	11%	7%	10%
Mother drank alcohol during pregnancy	3%	4%	2%
Mother used illicit drugs during pregnancy	5%	5%	5%
Child born with serious medical problems	9%	16%	13%
Born Prematurely (before 37 weeks gestation)	10%	14%	11%
Born Low Birth weight (under 5 lbs 8 oz)	9%	11%	12%
Child has a pediatrician	99%	99%	98%

Education and Employment Rates at Program Entry

Statewide Data, 2011

Mothers' Life Course Information

Mothers' education and employment data are presented in Table 15, separating mothers who were 19 years or younger when they had their child from those who were 20 and older. These data were separated due to different expectations in employment and education based on mother's age.

Table 15. Mothers' Life Course, Statewide, 2011	19 and younger	20 and older
Mother Education	(N=197)	(N=343)
Eighth grade or less	6%	4%
More than 8 th grade, < high school	62%	14%
High school degree or GED	22%	33%
Vocational training or some college	10%	35%
College degree or graduate work	0%	14%
Mother Enrolled in School	(N=197)	(N=345)
Yes	56%	14%
Employment Status	(N=197)	(N=254)
Mother not employed	90%	62%
Mother employed	10%	38%
Full-time	2%	20%
Part-time job or occasional work	8%	12%
Employed Prior to Pregnancy	(N=191)	(N=334)
Yes	24%	71%

- 68% of the younger cohort of mothers had less than a high school education at program entry, and a total of 56% of young mothers were enrolled in school. Specifically, of the 133 young mothers who had not completed high school, 75 (56%) were enrolled in middle school, high school, or a GED program. In comparison, 18% or 63 mothers of the older cohort had not completed high school and of those mothers older than 20, 11 or 17% were enrolled in school at program entry.
- 24% of the younger cohort of mothers were employed prior to pregnancy; only 10% of mothers remained employed when they entered NFN. For the older cohort, 71% were employed prior to pregnancy and only 38% of these older mothers were employed at program entry.

Fathers' Life Course Information

Our data on fathers include responses from fathers participating in home visiting services in addition to mothers reporting on behalf of fathers. As with mothers' data, we analyzed employment and educational data by fathers' age at baby's birth (see Table 16).

Table 16. Fathers' Life Course, Statewide, 2011	19 and younger	20 and older
Father Education	(N=73)	(N=233)
Eighth grade or less	1%	7%
More than 8 th grade, < than HS	75%	18%
High school degree or GED	19%	44%
Vocational training or some college	4%	20%
College degree or graduate work	0%	12%
Father Enrolled in School	(N=7)	(N=244)
Yes	45%	7%
Employment Status	(N=79)	(N=276)
Father not employed	65%	30%
Father employed	35%	70%
Fathers With an Arrest History	(N=51)	(N=208)
Yes	35%	38%
Fathers Currently Incarcerated	(N=49)	(N=193)
Yes	4%	6%

- For the younger cohort, 76% of the fathers had less than a high school education, and of these 56 fathers, 29 (52%) were enrolled in school. For the older cohort, 25% had less than a high school education and of these 57 fathers, 2 were enrolled in school at program entry.
- 20% of the older cohort of fathers had some post-secondary education (either vocational training or some college).
- 35% of the younger cohort and 70% of the older cohort of fathers were employed.
- 35% of the younger cohort and 38% of the older cohort had an arrest history, and 4% and 6%, respectively, were incarcerated at the time of program entry.

Home Visitation Participation, Statewide Data, 2011

Table 17. Program Participation Rates, 2007-2011

Frequency of Home Visits & Program Participation	2007 N=1342	2008 N=1716	2009 N=1997	2010 N=1897	2011 N=2034
Average # of attempted home visits	2.9	2.9	2.8	2.9	2.9
Average # of completed home visits	2.1	2.1	2.1	2.2	2.2
Average # of office/out of home visits	0.2	0.1	0.1	0.1	0.1
Average # of NFN social events attended	0.1	0.1	0.1	0.1	0.1
Total # of visits completed	2.4	2.3	2.3	2.4	2.3

Fig 6. Six month, 1 year, and 2 year Program Retention Rates by Year of Program Entrance

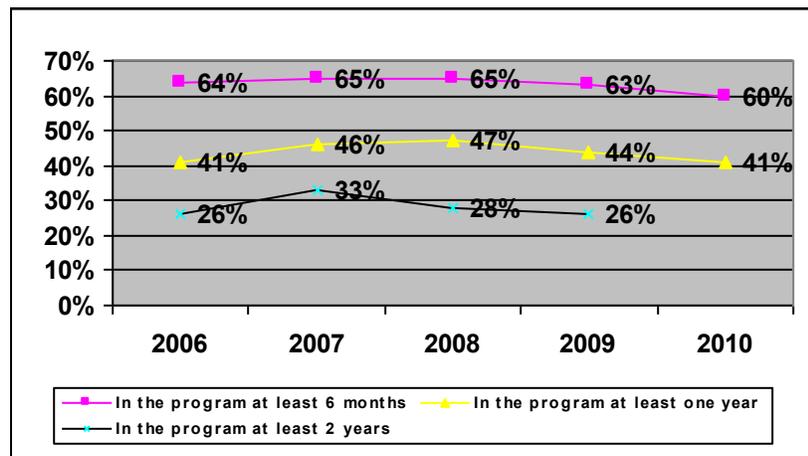


Table 18. Reasons Families Leave the Program, 2006-2010

Reasons Families Left NFN Home Visiting	2007 N=560	2008 N=608	2009 N=846	2010 N=779	2011 N=784
Family moved out of service area	15%	16%	17%	19%	16%
Unable to locate mother	32%	36%	37%	34%	33%
Discharged, family was noncompliant	0%	0%	0%	0%	0%
Family decided to discontinue services	15%	16%	15%	13%	13%
Mother is working or in school full-time, no time for home visits	15%	13%	13%	14%	14%
Goals were met/family graduated	9%	8%	7%	8%	10%
Baby removed from home by DCF	3%	2%	2%	2%	2%
Discharged, family was not appropriate for the program	1%	1%	1%	2%	<1%
Other family member did not approve of services	1%	<1%	1%	<1%	<1%
Home visitor left the program	1%	2%	3%	4%	4%
Other	8%	4%	5%	3%	8%

Program Participation Rates

Program services consist mostly of home visits and, on average, families receive 2 home visits per month out of an attempted 3, as shown in Table 17. Rates of program participation have remained stable over the past 5 years.

Program Retention Rates

Six month, one year, and two year retention rates are shown in Figure 6 by the year families enter the program. For families who entered the program in 2010, 60% remained in the program for at least six months, and 41% remained in the program at least one year, a small decline from the 2008 and 2009 cohorts. Regarding the two year retention rate beginning in the 2009 cohort, 26% of families entering the program participated for two years, slight decrease from the 2008 cohort. Of all the families who had the opportunity to be in the program for five years, the average length of stay is approximately 20 months, which is consistent with the average months reported for 2010 (21 months).

Reasons Families Leave NFN

As shown in Table 18, the reasons why families ended services in 2011 were due to:

- 10% of families met their personal goals. Of those 9% graduated after 5 years from home visiting services.
- Almost a half of families (49%) moved out of the service area or the staff was unable to locate family at their known address.
- 14% of families were not available for services (working or in school)
- 8% of families made a decision to leave the program (for unspecified reasons)

Statewide Parent Outcomes, 2011

Change in Utilization of Community Resources

Community Life Skills Scale

The Community Life Skills (CLS) scale is a self-report standardized instrument that measures knowledge and use of resources in his/her community. The CLS produces an overall score as well as scores on six subscales: Transportation, Budgeting, Support Services, Support Involvement, Interests/Hobbies, and Regularity/Organization/Routines. The overall (Total) score on the CLS ranges from 0-33, with higher scores indicating more effective use of community resources.

- As shown in Table 19, data on the Total CLS scale and each of the subscales were analyzed separately (in a repeated measures analysis of variance) for mothers who participated 1 year (N= 284) and 2 years (N=129).

- Analyses for both one and two year participants showed statistically significant changes on the Total scale and on the majority of the subscales (the only exception was the Interests/Hobbies subscale).
- The greatest effect size at 1 year comparison was found on Transportation and Support/ Involvement subscales; Cohen’s effect size value ($d = .53$). This indicates mothers are more likely to describe an alternate method or have a reliable form of transportation and mothers are more likely to have a close confidant and make a contact with this friend at least once a week.
- These significant improvements indicate families are becoming more knowledgeable on available resources and how to access them, and are becoming more stable in terms of daily routine.

Table 19. Change in Mean Scores on the Community Life Skills Scale for 1 & 2 Year Participants

Community Life Skills Scale (N=209) 2010	Program Entry	1 Year	
Total	24.3	26.0***	
Transportation	3.2	3.4***	
Budgeting	3.6	3.8*	
Support services	4.1	4.4***	
Support/Involvement	4.5	4.9***	
Interests/Hobbies	2.6	2.7	
Regularity/Organization/Routines	6.7	6.9*	
Community Life Skills Scale (N=129) 2009	Program Entry	1 Year	2 Year
Total	24.1	25.8	26.4***
Transportation	3.2	3.5	3.6***
Budgeting	3.4	3.8	4.0***
Support services	4.1	4.3	4.5**
Support/Involvement	4.4	4.9	5.0***
Interests/Hobbies	2.9	2.8	2.7
Regularity/Organization/Routines	6.6	6.8	7.0**
*p<.05 **p<.01 ***p<.001			

Change in Mothers' Life Course Outcomes, Statewide Data, 2011

Home visitors administer a questionnaire at entry, and once per year (up to 5 years) for each family active in the program on life course outcomes. As shown in Table 20, change in each of the life course outcomes was analyzed separately (in a repeated measures analysis of variance) for mothers who completed the questionnaire each year they participated for one year (2010-2011) and two years (2009-2011). (Note: Different N size is due to missing/unknown data.)

Education, Employment, Independent Living

- Mothers who received one year of NFN services made significant gains in education, with 63% having at least a high school degree at 1 year compared to 58% at entry. After two years of NFN services, significant outcomes were seen in education, employment, and independent living. After two years, 67% of mothers

had completed at least a high school education, 48% were employed, and 54% were living independently of family.

Social Isolation

- Home visitors' assessed significantly fewer mothers as socially isolated at two years (11%) as compared to program entry (27%). The decrease after one year was also significant.

Financial Difficulties

- Use of TANF and Food Stamps increased significantly for 1 and 2 year participants.
- Use of WIC increased significantly for 1 year and 2 year participation.
- Data indicate that although mothers are receiving more education and are better employed, they continue to struggle financially.

Table 20. Change in Mothers' Life Course Outcomes for 1 & 2 Year Participants, Statewide Data

Mothers' Living Circumstances: 2010-2011	N	Entry	1 Year	
Mothers with at least a high school education	161	58%	63%*	
Mothers employed	165	19%	35%***	
Mothers employed full-time	176	7%	15%***	
Mothers enrolled in school	167	30%	28%	
Mothers experiencing financial difficulties	146	71%	69%	
Mothers socially isolated	148	26%	16%*	
Mothers living independently of family	167	30%	47%***	
Mothers receiving TANF	163	7%	15%***	
Mothers receiving Food Stamps	160	23%	38%***	
Mothers receiving WIC	161	81%	88%	
Mothers' Living Circumstances: 2009-2011	N	Entry	1 Yr	2 Yr
Mothers with at least a high school education	127	56%	66%	67%**
Mothers employed	130	25%	37%	48%***
Mothers employed full-time	136	9%	15%	25%***
Mothers enrolled in school	129	22%	27%	33%*
Mothers experiencing financial difficulties	120	72%	73%	74%
Mothers socially isolated	123	27%	15%	11%***
Mothers living independently of family	123	28%	37%	54%***
Mothers receiving TANF	129	5%	15%	21%***
Mothers receiving Food Stamps	124	15%	33%	41%***
Mothers receiving WIC	124	79%	91%	87%*
*p<.05 **p<.01 ***p<.001				

Change in Fathers' Life Course Outcomes, Statewide Data, 2011

Father Life Outcomes

As already noted, our data on fathers are limited primarily because information is often collected from the mothers if fathers are not part of the home visits. Past research has shown that mothers tend to rate father involvement lower than fathers do (see Life Stories Report, 2004). For this reason, these data should be interpreted with caution. Our data on fathers include responses from fathers participating in home visiting services in addition to mothers reporting on behalf of fathers.

- Separate analyses were conducted for families receiving 1 year and 2 years of service by the end of 2011.

Education and Employment

- For families that participated for one year as of the end of 2011, fathers made significant gains in education; 54% had completed a high school education at one year compared to 49% at pro-

gram entry. There was no significant change after two years.

- Significant change was not found in fathers' employment at one or two year data points.

Financial Difficulties

- Rates of fathers who experience financial difficulties increased after one and two years, although not significantly.

Social Isolation

- The percentage of fathers documented as socially isolated remained the same from entry with both 1 (9%) and 2 (9%) year participants.

Involvement with Children

- Fathers' involvement with their children decreased after one and two years. After two years, 73% of fathers were at least somewhat involved with their children compared to 82% at program entry.

Table 21. Change in Fathers' Life Course Outcomes for 1 & 2 Year Participants, Statewide Data				
Fathers' Living Circumstances, 2010-2011	N	Entry	1 Year	
Fathers with at least a high school education	80	49%	54%*	
Fathers employed	110	61%	63%	
Fathers employed full-time	176	23%	30%	
Fathers enrolled in school	113	20%	12%**	
Fathers with financial difficulties	80	71%	70%	
Fathers socially isolated	76	11%	9%	
Fathers at least somewhat involved with their children	97	68%	71%	
Fathers' Living Circumstances, 2009-2011	N	Entry	1 Year	2 Year
Fathers with at least a high school education	84	54%	56%	57%
Fathers employed	88	70%	70%	72%
Fathers employed full-time	136	35%	33%	40%
Fathers enrolled in school	84	14%	10%	10%
Fathers with financial difficulties	68	71%	82%	74%
Fathers socially isolated	65	9%	9%	9%
Fathers at least somewhat involved with their children	78	82%	74%	73%
*p<.05 **p<.01 ***p<.001				

Change in Mothers' Attitudes & Potential for Abuse, Statewide Data, 2011

Child Abuse Potential Rigidity Subscale

The Child Abuse Potential Inventory (CAPI) is a self-report standardized instrument designed to measure someone's potential to abuse or neglect a child. We use the Rigidity Subscale of the CAPI (CAPI-R) to assess changes in rigid parenting attitudes over time. A significant decrease on the Rigidity subscale reveals that a mother is less likely to feel that her children should, for example, *always* be neat, orderly, and obedient. Mothers who have less rigid expectations of their children are less likely to treat their children forcefully.

The average score for a normative population on the CAPI-R is 10.1 with a standard deviation of 12.5. The cut off score on the Capi-R is 30, with only 5% of the general population scoring at or above this score.

- The CAPI-R data show us that NFN mothers come into the program with scores indicative of high risk. In 2011, NFN mothers came into the program with an average score of 26.6

(N=670), more than one standard deviation above the normative mean. Further, while only 5% of the general population scores at or above the cut-off of 30, 42% of the NFN population (N=670) did at program entry.

- As shown in Table 22, mothers who participated in the program for one and two years made statistically significant improvements on the Rigidity subscale, indicating a reduction in their risk for maltreating their children.
- We performed a separate analysis of CAPI-R data for mothers who scored at or above the cut-off score and those who scored below the cut-off score at program entry. As shown in Table 23, there were significant decreases in CAPI-R scores at both the 1 year and 2 year data points for mothers who scored at or above the cut-off at program entry, although scores still remained above or right around the cut-off. Conversely, there were no significant decreases in scores for those who were below the cut-off at program entry.

Table 22. Change in Means Scores on the Child Abuse Potential Inventory Rigidity Subscale for 1 and 2 Year participants, Statewide Data, 2011

CAPI Rigidity Scores 2010-2011 (N=214)	Entry	1 Year			
Rigidity	27.4	21.9***			
CAPI Rigidity Scores 2009-2011 (N=146)	Entry	1 Year	2 Year		
Rigidity	25.6	21.8	18.5***		
* p<.05 ** p<.01 *** p<.001					

Table 23. Change in Means Scores on the Child Abuse Potential Inventory Rigidity Subscale for 1 and 2 Year Participants by Entry CAPI-R Score, Statewide Data, 2011

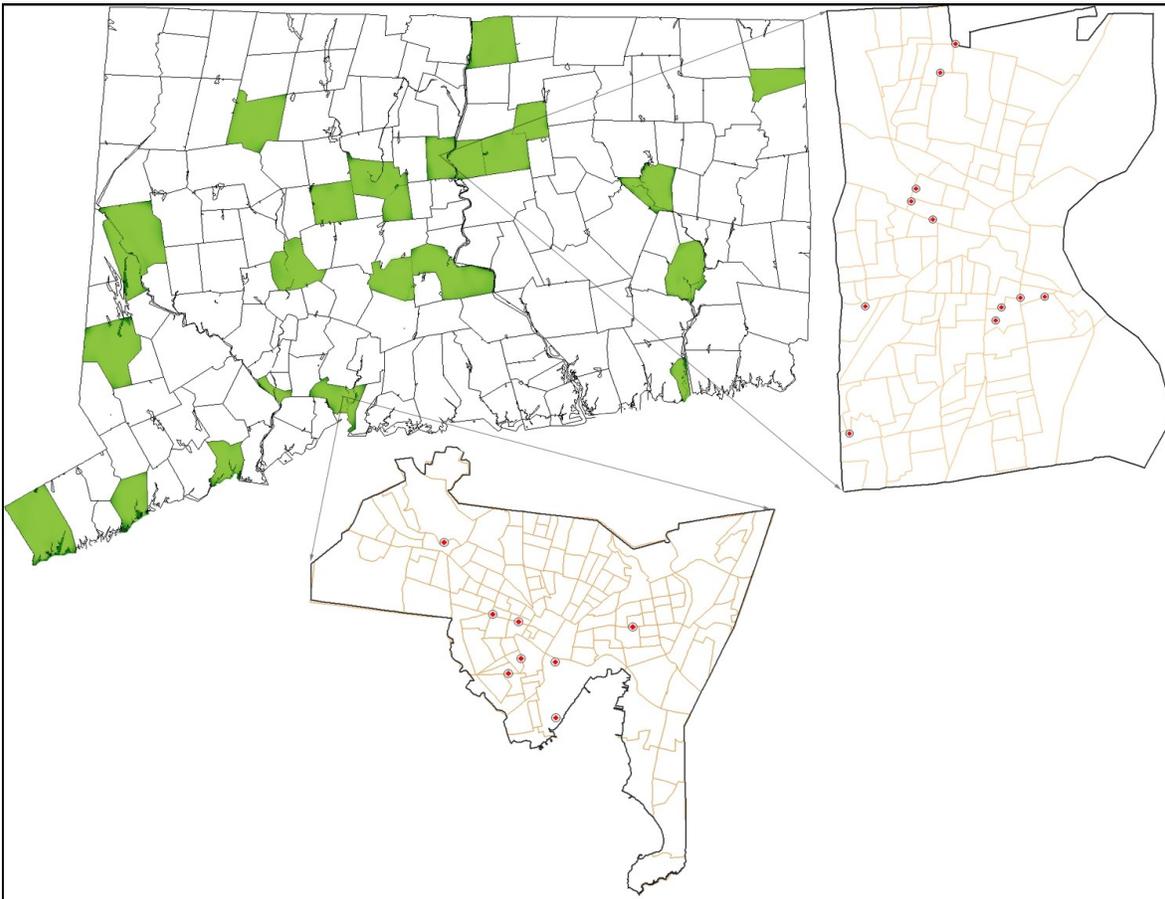
CAPI Rigidity 2010-2011	Scored Below Cut-Off at Entry (N=122)		Scored At or Above Cut-Off at Entry (N=92)			
	Entry	1 Year	Entry	1 Year		
Mean Score	15.5	14.5	43.1	31.7***		
CAPI Rigidity Scores 2009-2011	Scored Below Cut-Off at Entry (N=87)			Scored At or Above Cut-Off at Entry (N=59)		
Rigidity	Entry	1 Year	2 Year	Entry	1 Year	2 Year
Mean Score	14.9	16.1	14.1	41.2	30.3	25.0***
* p<.05 ** p<.01 *** p<.001						

Section 3

NFN Urban Focus, 2011

In 2005, Hartford was targeted as the first city in Connecticut to “go to scale”- that is, to screen all first-time mothers for home visitation services in the city. Accordingly, the NFN home visitation program was expanded from two to ten program sites within Hartford. At the end of 2007, New Haven was the second city to go to scale, from three to eight program sites (also see Table 1). Taking the program to scale in urban communities is an attempt to target parenting practices among vulnerable families who often reside in resource-deprived neighborhoods. This section reports on the progress of the ten program sites in Hartford, and the eight program sites in New Haven. In these sections, enrollment, descriptive, and outcome data are examined for high-risk families who received home visitation. Enrollment, descriptive characteristics, and outcome data for families participating in home visitation within the Hartford and New Haven NFN sites are presented. Where relevant, urban data with statewide data are compared in a variety of measures. This is done to highlight differences in demographics which may explain differences in family participation or outcomes.

Figure 7. Enhanced Program Services in Hartford and New Haven



2011 Hartford Data Analysis: Summary of Key Findings

In this next section, enrollment, demographic and risk characteristics, participation and retention rates, and outcome data are examined for high-risk families who received home visitation in NFN sites of Hartford, CT. Below is a summary of highlights.

Program Capacity and Enrollment of Families

- In 2011, 1,772 first-time mothers were screened for risk in Hartford and 1,185 (67%) of these first-time mothers were identified as at low-risk for poor parenting. Twenty-one percent of these mothers were offered Nurturing Connections phone support and referral services.
- Of the 1,772 first-time mothers screened in 2011, 587 (or 33%) were identified high-risk for poor parenting. Of these mothers, 469 were offered home visiting and 216 initiated services.

Demographic and Risk Profiles

- In 2011, Hartford mothers showed the most stress in the areas of finances and relationships, as well as past experiences of child maltreatment as measured by the Kempe Family Stress Inventory.
- Hispanic mothers are overrepresented (46% in NFN state and 63% in NFN Hartford) whereas Black mothers (20% in NFN state vs. 20% in NFN Hartford) and White mothers (3% in NFN Hartford) are underrepresented in Hartford NFN compared to the citywide population (Census Bureau, 2010). In addition, compared to statewide, on average less fathers live in the households (40% in Hartford compared to 45% statewide), and less fathers are involved with their children (73% at least somewhat involved in Hartford compared to 77% statewide).
- 10% of Hartford births were below 37 weeks of gestation (premature births) which is slightly less than Statewide birth outcomes (11%).

Participation and Retention Rates

- Similar to previous years, Hartford families received an average of two home visits per month out of an attempted three in 2011.
- In 2011, there were slight increases in the 6 month, 1 year, and 2 year retention rates, which differs from the statewide population (which had slight decreases in retention). Sixty-five percent of families remained in the program for at least 6 months, 49% remained in the program for at least 1 year, and 29% remained for at least 2 years.

Hartford NFN Program Outcomes

- Hartford mothers showed significant increases in their use of community resources after six months, one year, and two years. Specifically, after two years of program participation, mothers scored significantly higher on budgeting (financial resources) and support services.
- Further, mothers who scored at or above the CAPI-R cutoff showed significant decreases in their rigid parenting beliefs after six months, one year, and two year.

High-Risk Families and Enrollment in Home Visitation, Hartford 2011

In this section, we provide enrollment data for those who screened at low-risk (and participated in Nurturing Connections) and those who screened at high-risk (and participated in home visiting services) at the Hartford sites in 2011.

Screening

As shown in Table 24, there were a total of 1,772 screens completed at the Hartford sites in 2011, which represents 28% of all screens completed statewide. In Hartford, 67% (N=1,185) of families screened at low-risk; 21% (N=244) were offered Nurturing Connections phone support and referral services, and of those offered, 43% (N=104) accepted. Of the instances in which Nurturing Connections services were not offered in 2011, approxi-

mately 41% of the time the program was at capacity and 30% of the time the family lived outside the catchment area (data not shown here).

As shown in Table 25, of the 1,772 screens completed in Hartford in 2011, 587 (33%) were identified as high-risk. Of these high-risk families, 80% were offered home visiting services, and of those offered, 46% (N=216) accepted and initiated services. With comparable families identified as high risk in 2011 (1772 families) and 2010 (1723 families), more families initiated services in 2011 (216 families) as compared to 2010 Hartford enrollment data (152 families).

Total # of screens	1,772
# Low Risk	1,185
Offered Nurturing Connections	244 (21%)
Accepted Nurturing Connections	104 (43%)
# High-risk	587
Offered Home Visiting	469 (80%)
Accepted Home Visiting	281 (60%)
Initiated services	216 (78%)

Families Identified as High-risk	2009 (N=2063)	2010 (N=1723)	2011 (N=1772)
# of Positive Screens	662	501	587
Offered HV (no 2nd screen)	452 (68%)	381 (76%)	469 (80%)
Initiated services	183 (40%)	152 (40%)	216 (46%)

Risk Profiles: Hartford Mothers' Scores on the Kempe Inventory, 2011

2011 Hartford Mothers' Kempe Scores on Individual Items

The Kempe Family Stress Inventory (Kempe) is scored across 10 items, with each item scored either 0 (no/low risk), 5 (moderate risk), or 10 (severe risk), to indicate the presence and severity of past and current stressors. Each of these items, includes a larger set of criteria from which judgments are made, and these criteria provide a much better description of stress. As part of our research design in Hartford, we report on these data for families who scored in the severe range focusing on items with the highest rates of severe stress:

- *Multiple Stresses*: Forty-two (31%) of mothers scored in the severe range on this subscale. Of those mothers, 32 (76%) reported financial concerns as a source of major stress, 24 (57%) reported their living situation was seen as stressful, 16 (38%) experienced multiple separations and/or threats of divorce, and 14 (33%) reported constant conflict in their relationship.
- *Childhood History of Abuse/Neglect*: Forty-eight (35%) of mothers scored in the severe range on this subscale. Of these mothers, 26 (54%) experi-

enced severe beatings as a child, 25 (52%) were raised by more than two families, 23 (48%) were removed from their home or were abandoned, 20 (41%) have histories of running away from home, and 17 (35%) were raised in a family with at least one alcoholic or drug addicted parent

- A sizeable percentage of mothers scored as moderate on other Kempe subscales (Child Unwanted/ Poor Bonding, Low Self-esteem/ Social Isolation/ Depression, and Multiple stresses), which indicate additional concerning scores of family stress and risk for child maltreatment and/or parenting difficulties.

Families at Acute Risk

As described earlier, according to NFN policy, a family that is experiencing acute stress is one that is facing an unaddressed mental health problem, untreated substance abuse, or an episode of domestic violence. In Hartford in 2011, 12% of incoming mothers were classified as experiencing acute stress, which is greater than the 7% reported statewide. Further, in 2011, 6% of all Hartford mothers were documented as experiencing acute stress at some point during the year. This is slightly less than the 7.6% reported statewide this year.

Table 26. Hartford Mothers' Kempe Scores, 2011	0 Low	5 Moderate	10 Severe
Multiple Stresses (N=137)	18%	51%	31%
Childhood History of Abuse/Neglect (N=137)	40%	25%	35%
History of Crime, Substance Abuse, Mental Illness (N=137)	59%	26%	15%
Low Self-esteem/ Social Isolation/ Depression (N=137)	22%	56%	22%
CPS History (N=137)	83%	9%	7%
Potential for Violence (N=136)	81%	11%	8%
Child Unwanted/ Poor Bonding (N=134)	27%	68%	5%
Unrealistic Expectation of Child (N=136)	57%	37%	6%
Harsh Punishment (N=137)	91%	5%	4%
Negative Perception of Child (N=135)	90%	10%	0%

Home Visitation Families at Program Entry Hartford Data, 2011

Health Related Risk Factors

Health data provided in Table 27 indicate that:

- 14% of NFN children were born with serious medical problems, 10% were born premature, and 9% with low birth weight. All three rates decreased from 2010 rates.
- Rate of premature births in Hartford in 2011 (10%) is slightly lower than the NFN statewide percentage (11%),
- The rate of children born with low birth-weight (9%) is also lower than the state NFN rate of 12%.

Family and Household Data

Prenatal Screens (N=200)	51%
Mother's Marital Status (N=54)	
Single, never married	88%
Married	8%
Divorced, separated, widow	4%
Mother's Race/Ethnicity (N=159)	
White	3%
Black	20%
Hispanic	63%
Other (includes multi-racial)	14%
Mother age at Baby's Birth (N=114)	
Under 16 years	3%
16-19 years	31%
20-22 years	22%
23-25 years	20%
26 years and older	25%
Median Age	22 yrs
Maternal Grandmother Living in the Household (N=166)	33%
Father Living in the Household (N=166)	40%
Father's Involvement W/ Child (N=79)	
Very involved	63%
Somewhat involved	10%
Sees child occasionally	5%
Very rarely involved	3%
Does not see baby at all	19%

Table 27. Pregnancy & Birth Information, Hartford Data, 2009-2011

Health Related Risk Factors	2009 N=109	2010 N=97	2011 N=130
Mother smoked cigarettes during pregnancy	4%	6%	4%
Mother drank alcohol during pregnancy	2%	0%	3%
Mother used illicit drugs during pregnancy	3%	3%	5%
Child born with serious medical problems	6%	15%	14%
Premature Birth (before 37 weeks gestation)	10%	19%	10%
Born Low Birth Weight (under 5 lbs 8 oz)	11%	14%	9%
Child has a pediatrician	99%	100%	98%

- Hispanic mothers are over-represented (46% in NFN and 63% in the city) and Black mothers are underrepresented in NFN Hartford (20%) compared to the city-wide population (39%, Census Bureau, 2010). White mothers are also underrepresented in NFN Hartford sites (3%) compared to the city-wide population (29.8%).
- 51% of participating Hartford mothers were screened prenatally, compared to 41% statewide.
- 88% of Hartford NFN mothers were single/never married (85% statewide).
- Mean age at child's birth was 22 years (same as statewide).
- Slightly less participants were living with their mothers in Hartford (33% vs. 38% statewide).
- Less fathers were living in Hartford NFN households (40%) compared to statewide (45%).
- 73% of Hartford fathers (N=79) were at least somewhat involved in their child's lives at program entry, compared to 77% statewide.

Financial and Social Risk Factors

- As shown in Table 29, home visitors considered 74% of mothers to have financial difficulties at the time of program entry, which is slightly higher than statewide percentage (71%).
- Home visitors perceived 23% of Hartford mothers to be socially isolated, compared with 27% statewide.
- 22% of Hartford mothers had an arrest history, compared to 18% statewide.
- 11% of Hartford households were receiving TANF, comparable to 10% statewide.
- More mothers were receiving Food Stamps in Hartford (39%) compared to statewide (31%).

Table 29. Hartford Mothers' Social Isolation, Arrest Histories & Financial Difficulties, 2011

Socially isolated (N=154)	23%
Arrest history (N=162)	22%
Financial difficulties (N=155)	74%
Receiving TANF (N=160)	11%
Receiving Food Stamps (N=160)	39%

Education and Employment Rates at Program Entry Hartford Data, 2011

Hartford NFN 2011:

Mothers' Life Course Information

Mothers' education and employment data are presented in Table 30, separating mothers who were 19 years or younger when they had their child from those who were 20 and older. These data were separated due to different expectations of employment and education based on mother's age.

- Seventy-one percent of the younger cohort of mothers had less than a high school education at program entry. Of the 27 mothers who had not finished high school at program entry, 19 were enrolled in school. In comparison to the statewide population, the older cohort in Hartford had slightly less education: 25% had less than a high school degree versus 18% statewide; 35% had some post secondary education in Hartford, equivalent to the HV statewide population (35%).
- Rates of employment for Hartford mothers (8% for the young cohort and 27% for the older cohort) differed than employment rates for statewide mothers (10% for the younger cohort and 38% for the older cohort). Hartford data shows fewer employment rates than the HV statewide population in the older cohort.

Hartford NFN 2011:

Fathers' Life Course Information

We also analyzed father's employment and education data by father's age at baby's birth. These data should be interpreted with caution; home visitors often rely on mothers to provide information. The data on fathers include responses from fathers participating in home visiting services in addition to mothers reporting on behalf of fathers.

- For the younger cohort, 67% of fathers (N=18) had less than a high school education and 8 of these 12 fathers were enrolled in school; 16% of fathers had less than a high school education.
- Almost three quarters or 74% of the younger fathers (N=19) and two fifths or 40% of the older fathers were unemployed.
- 38% of the 13 younger fathers and 38% of the 47 older fathers had an arrest history.
- One of the 12 younger fathers and 2 of the 44 older fathers were incarcerated.

Table 30. Mothers' Life Course, Hartford Data, 2011

Mother Life Course Indicators	19 and younger	20 and older
Education	(N=38)	(N=74)
Eighth grade or less	3%	5%
More than 8 th grade, < high school	68%	20%
High school degree or GED	13%	26%
Some vocational training/college	16%	35%
College degree or graduate work	0%	14%
Enrolled in School	(N=38)	(N=75)
Yes	63%	17%
Employment Status	(N=38)	(N=74)
Mother not employed	92%	73%
Mother employed	8%	27%
Full-time	0%	16%
Part-time job or occasional work	8%	8%
Employed Prior to Pregnancy	(N=34)	(N=53)
Yes	18%	55%

Table 31. Fathers' Life Course, Hartford Data, 2011

Father Life Course Indicators	19 and younger	20 and older
Education	(N=18)	(N=51)
Eighth grade or less	0%	8%
More than 8 th grade, < high school	67%	8%
High school degree or GED	28%	35%
Some vocational training/college	6%	37%
College degree or graduate work	0	12%
Enrolled in School	(N=19)	(N=51)
Yes	47%	10%
Employment Status	(N=19)	(N=52)
Father not employed	74%	40%
Father employed	26%	60%
Full-time	15%	40%
Part-time job, occasional work, Or working more than one job	10%	9%
Fathers With an Arrest History	(N=13)	(N=47)
Yes	38%	38%
Currently Incarcerated	(N=12)	(N=44)
Yes	8%	5%

Home Visitation Participation, Hartford Data, 2011

Table 32. Hartford Program Participation, 2009 - 2011

Frequency of Home Visits	2009 N=510	2010 N=440	2011 N=498
Average # of attempted home visits	3.0	3.0	2.9
Average # of completed home visits	2.0	2.1	2.1
Average # of office/out of home visits	0.1	0.1	0.1
Average # of NFN social events attended	0.1	0.1	0.1
Total # of visits completed	2.2	2.3	2.3

Figure 8.
Six Month, 1 Year, and 2 Year Program Retention Rates by Year of Program Entrance, Hartford Data

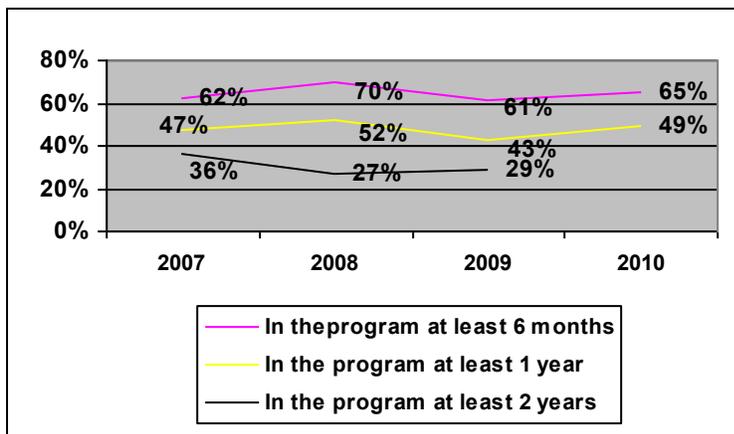


Table 33. Reasons Hartford Families Leave Home Visiting, 2009 - 2011

Reasons Hartford Families Left the Program	2009 N=206	2010 N=172	2011 N=147
Family moved out of service area	20%	19%	13%
Unable to locate mother	41%	36%	48%
Discharged, family was noncompliant	0%	0%	0%
Family decided to discontinue services	12%	15%	10%
Mother is working or in school full-time, no time for home visits	11%	12%	17%
Goals were met/family graduated	2%	7%	2%
Baby removed from home by DCF	2%	3%	3%
Discharged, family was not appropriate for the program	1%	3%	0%
Other family member did not approve of services	1%	1%	1%
Home visitor left the program	2%	1%	0%
Other	8%	3%	6%

Participation Rates

- Similar to the statewide population, families in Hartford, on average, receive 2 home visits per month (see Table 32) out of an average of 3 attempts. These data have remained consistent over the past three years.

Program Retention Rates

- Six month, one year, and two year retention rates for Hartford are shown in Figure 8 for the past three full years. For families who entered the program in 2010, 65% remained in the program for at least six months, and 49% remained in the program at least one year, an increase from the 2009 cohort (43%). Going back to 2009 for the two year retention rate, 29% of families entering the program participated for two years, a decrease from the 2007 cohort (36%). Similar decreases were seen in the statewide 2-year retention rates.

Reasons Families Leave the Program

As shown in Table 18, Hartford families ended NFN home visiting services in 2011 because:

- 48% of families relocated without informing staff or the staff was unable to locate family at their known address. This rate is greater than statewide rates.
- Another 13% of families discontinued services because they moved out of the service area (and informed staff).
- 10% of families decided to leave the program for "unspecified reasons".
- 2% of families who left the program graduated or met their goals, comparable to 2008 and 2009 rates, but less than 2010 graduation rates.

Utilization of Community Resources Hartford Parent Outcomes, 2011

Community Life Skills Scale (CLS):

The Community Life Skills (CLS) scale is a self-report standardized instrument that measures someone's knowledge and use of resources in his/her community. The CLS produces an overall score as well as scores on six subscales: Transportation, Budgeting, Support Services, Support Involvement, Interests/Hobbies, and Regularity/Organization/Routines. The overall (Total) score on the CLS ranges from 0-33, with higher scores indicating more effective use of community resources.

- Table 34 shows that statistically significant changes in total CLS scores were documented after 6 months (N=60), 1 year (N=37), and 2 years (N=21) of program participation on the total scale as well as on several subscales. Specifically, after six months, significant increases were seen in the areas of budgeting, support services, support/ involvement and the CLS total. Following one year of enrollment, significant change was seen in the areas of budgeting, support services, and support/ involvement. After two years, significant change was seen in the areas of accessing support services, and budgeting finances; however, there were no significant differences in total scores.
- Overall, these data indicate that parents are increasing their knowledge of community resources and how to access them, and are becoming more stable in terms of daily living.

Table 34. Change in Mean Scores on the Community Life Skills Scale 6 Month, 1 and 2 Year Participants, Hartford, 2011

Community Life Skills	Entry (N=60)	6 Months		
Total	22.4	24.2***		
Transportation	3.2	3.3		
Budgeting	2.83	3.6***		
Support services	4.0	4.3**		
Support/Involvement	3.9	4.4**		
Interests/Hobbies	2.6	2.6		
Regularity/Organization/Routines	6.3	6.6		
Community Life Skills	Entry (N=34)	6 Months	1 Year	
Total	22.2	23.5	24.8**	
Transportation	3.2	3.2	3.5	
Budgeting	2.8	3.1	3.7**	
Support services	3.9	4.3	4.5*	
Support/Involvement	3.7	4.3	4.4*	
Interests/Hobbies	2.7	2.5	2.5	
Regularity/Organization/Routines	6.3	6.7	6.7	
Community Life Skills	Entry (N=21)	6 Months	1 Year	2 Year
Total	22.8	23.9	25.0	25.1
Transportation	3.2	3.4	3.7	3.8
Budgeting	3.0	3.4	3.7	3.6**
Support services	4.0	4.3	4.6	4.4*
Support/Involvement	3.6	4.6	4.3	4.5
Interests/Hobbies	2.9	2.7	2.7	2.8
Regularity/Organization/Routines	6.5	6.7	6.6	6.8
*p<.05 **p<.01 ***p<.001				

Change in Mothers' Life Course Outcomes, Hartford Data, 2011

Home visitors administer a questionnaire annually for each family active in the program on life course outcomes. As shown in Table 35, change in each of the life course outcomes was analyzed separately (in a repeated measures analysis of variance) for mothers who completed the questionnaire at 6 months (2010-2011), 1 year (2010-2011) and two years (2009-2011). (Note: Different N size is due to missing/unknown data.)

Education, Employment, Independent Living

- Mothers who received 1 and 2 years of NFN services made significant gains in living independent of family; after 2 year participation, more mothers received a high school education.

Financial Difficulties and Support

- Use of Food Stamps increased significantly for 6 month, 1 year, and 2 year participants.
- Use of TANF increased significantly after 1 and 2 year of participation.

Table 35. Change in Mothers' Life Course Outcomes for 6 Month, 1 & 2 Year Participants, Hartford Data					
Mothers' Living Circumstances: 2010-2011	N	Entry	6 Month		
Mothers with at least a high school education	62	55%	58%		
Mothers employed	65	25%	29%		
Mothers employed full-time	68	9%	16%		
Mothers enrolled in school	64	33%	33%		
Mothers experiencing financial difficulties	60	67%	70%		
Mothers socially isolated	58	14%	9%		
Mothers living independently of family	65	18%	34%		
Mothers receiving TANF	65	83%	85%		
Mothers receiving Food Stamps	63	44%	59%**		
Mothers receiving WIC	63	90%	95%		
Mothers' Living Circumstances: 2010-2011	N	Entry	6 Month	1 Year	
Mothers with at least a high school education	32	44%	47%	53%	
Mothers employed	33	30%	36%	33%	
Mothers employed full-time	37	11%	16%	16%	
Mothers enrolled in school	33	30%	36%	24%	
Mothers experiencing financial difficulties	31	68%	65%	71%	
Mothers socially isolated	29	7%	7%	17%	
Mothers living independently of family	35	17%	31%	40%**	
Mothers receiving TANF	35	3%	9%	11%	
Mothers receiving Food Stamps	33	27%	45%	45%*	
Mothers receiving WIC	33	88%	100%	94%	
Mothers' Living Circumstances: 2009-2011	N	Entry	6 Month	1 Year	2 Year
Mothers with at least a high school education	29	45%	52%	59%	62%**
Mothers employed	28	22%	32%	32%	38%
Mothers employed full-time	29	7%	6%	17%	31%**
Mothers enrolled in school	29	28%	38%	38%	45%
Mothers experiencing financial difficulties	26	69%	77%	81%	88%
Mothers socially isolated	27	7%	11%	7%	7%
Mothers living independently of family	28	14%	29%	36%	54%***
Mothers receiving TANF	29	3%	14%	31%	31%**
Mothers receiving Food Stamps	26	12%	42%	42%	58%***
Mothers receiving WIC	26	88%	100%	100%	88%
*p<.05 **p<.01 ***p<.001					

Change in Fathers' Life Course Outcomes, Hartford Data, 2011

Father Life Outcomes

As already noted, our data on fathers are limited primarily because information is often collected from the enrolled mothers if fathers are not participating in the home visiting program. For this reason, these data should be interpreted with caution. The data on fathers include responses from fathers participating in home visiting services in addition to mothers reporting on behalf of fathers.

- Separate analyses were conducted for families receiving 6 months, 1 year, and 2 years by the end of 2011.
- As shown in Table 36, there were no significant improvements in father life outcomes after 6 months, 1 year, and 2 years of program participation; this would be attributed to the sample size of the respondents. Following 2 years of participation, there was an increase of fathers earning at least a high school education as well as employment. Percentage of fathers who reported at least somewhat involved with their child remain consistent after two year (69%).

Table 36. Change in Fathers' Life Course Outcomes for 1 & 2 Year Participants, Hartford Data					
Fathers' Living Circumstances, 2010-2011	N	Entry	6 Month		
Fathers with at least a high school education	35	57%	57%		
Fathers employed	40	43%	48%		
Fathers with financial difficulties	30	63%	77%		
Fathers socially isolated	28	11%	7%		
Fathers at least somewhat involved with their children	32	63%	59%		
Fathers' Living Circumstances, 2010-2011	N	Entry	6 Month	1 Year	
Fathers with at least a high school education	18	56%	56%	61%	
Fathers employed	20	50%	55%	60%	
Fathers with financial difficulties	15	73%	80%	87%	
Fathers socially isolated	13	0%	8%	23%	
Fathers at least somewhat involved with their children	14	29%	29%	29%	
Fathers' Living Circumstances, 2009-2011	N	Entry	6 Month	1 Year	2 Year
Fathers with at least a high school education	15	40%	40%	53%	53%
Fathers employed	18	44%	56%	50%	50%
Fathers with financial difficulties	16	69%	75%	88%	88%
Fathers socially isolated	15	13%	13%	13%	7%
Fathers at least somewhat involved with their children	13	69%	69%	69%	69%
*p<.05 **p<.01 ***p<.001					

Change in Parenting Attitudes, Hartford Outcomes, 2011

Child Abuse Potential Inventory, Rigidity Subscale (CAPI-R): Hartford Outcomes

In Table 35, we present outcome data on the Child Abuse Potential Inventory Rigidity Scale (CAPI-R), a self-report scale that measures the rigidity of attitudes and beliefs about the appearance and behavior of children. The subscale is based on the theoretical assumption that rigid attitudes and beliefs lead to a greater probability of child abuse and neglect (Refer to page 19 for a more thorough description of the CAPI-R.). Hartford parents complete the CAPI-R at program entry, six months, and then on annual anniversaries of their start date in the program.

- Entry Rigidity scores in Hartford are significantly higher compared to statewide. For families who entered in 2011, the average entry Rigidity score for Hartford participants was 29.9 compared to statewide average of 26.6 for non-Hartford participants. At program entry, 50% of Hartford mothers scored at or above the cutoff score of 30, compared to 42% statewide.

- Similar to the statewide sample, we ran separate outcome analyses for Hartford participants active 6 months, 1 year, and 2 years who scored above the CAPI-R cut-off score at program entry and those who scored below the cut-off.
- The results of these analyses are shown in Table 37 below, and indicate that parents with scores at or above the cut-off at program entry made significant decreases in their rigid parenting attitudes after 6 months, 1 year, and 2 year of program participation. Significant change was not found over time for parents scoring below the cut-off at program entry.

Table 37. Change in Means Scores on the Child Abuse Potential Inventory Rigidity Subscale for 1 and 2 Year Participants by Entry CAPI-R Score, Hartford Data, 2010

CAPI Rigidity Scores 2010-2011	Scored Below Cut-Off at Entry (N=28)		Scored At or Above Cut-Off at Entry (N=35)	
	Entry	6 Month	Entry	6 Month
Rigidity	17.1	19.5	44.1	38.4**

CAPI Rigidity Scores 2010-2011	Scored Below Cut-Off at Entry (N=16)			Scored At or Above Cut-Off at Entry (N=23)		
	Entry	6 Month	1 Year	Entry	6 Month	1 Year
Rigidity	16.8	19.3	21.2	42.9	35.9	33.3**

CAPI Rigidity Scores 2009-2011	Scored Below Cut-Off at Entry (N=10)				Scored At or Above Cut-Off at Entry (N=15)			
	Entry	6 Month	1 Year	2 Year	Entry	6 Month	1 Year	2 Year
Rigidity	17.8	17.1	18.3	21.9	45.9	36.9	24.7	22.9***

* p<.05 ** p<.01 *** p<.001

2011 New Haven Data Analysis: Summary of Key Findings

In this next section, enrollment, demographic and risk characteristics, participation and retention rates, and outcome data are examined for high-risk families who received home visitation in NFN sites of New Haven, CT. Below is a summary of highlights.

Program Capacity and Enrollment of Families

- In 2011, 1,146 first-time mothers were screened for risk in New Haven and 642 (56%) of these first-time mothers were identified as at low-risk for poor parenting. Thirty– three percent of these mothers were offered Nurturing Connections phone support and referral services.
- Of the 1,146 first-time mothers screened in 2011, 504 (or 44%) were identified high-risk for poor parenting. Of these mothers, 478 were offered home visiting and 218 initiated services.

Demographic and Risk Profiles

- In 2011, New Haven mothers showed the most stress in the areas of finances and relationships, as well as past experiences of child maltreatment, and history of substance abuse/ crime/ mental health as measured by the Kempe Family Stress Inventory.
- Reported race and ethnicity demographics of mothers participating in NFN New Haven sites are proportionate to New Haven city (Census Bureau, 2010).
- In addition, compared to statewide, on average, less fathers live in the households (37% in New Haven compared to 45% statewide), and slightly more fathers on average are involved with their children (79% at least somewhat involved in Hartford compared to 77% statewide).
- 48% of mothers living in New Haven were screened prenatally, compared to 41% statewide.
- 11% of New Haven participating mothers gave birth prematurely (before 37 weeks of gestation) which is comparable to Statewide (11%) in 2011. Interestingly, 15% of the mother's babies were born under 5 pounds 8 ounces (low birth weight), a higher percentage than the Statewide of 12%.

Participation and Retention Rates

- Similar to previous years, New Haven families received an average of two home visits per month out of an attempted three in 2011.
- In 2011, there was a slight decrease in the 6 month, 1 year, and 2 year retention rates, which is comparable to the statewide population retention rate (which had slight decreases in retention). Fifty-four percent of families remained in the program for at least 6 months, 33% remained in the program for at least 1 year, and 19% remained for at least 2 years.

New Haven NFN Program Outcomes

- New Haven mothers showed significant increases in their use of community resources after six months, one year, and two years. Specifically, after two years of program participation, mothers scored significantly higher on support/ involvement on the Community Life Skills measure.
- Further, mothers who scored at or above the CAPI-R cutoff showed significant decreases in their rigid parenting beliefs after six months and one year of program participation.
- Significant changes in education were seen after 6 months of participation.

High-Risk Families and Enrollment in NFN New Haven Data, 2011

In this section, we provide enrollment data for those who screened at low-risk (and participated in Nurturing Connections) and those who screened at high-risk (and participated in home visiting services) at the New Haven sites. This is the New Haven network's fourth full year of program services, and similar to last year, many sites are close to or at program capacity.

Screening

- Table 38 shows that of the 1,146 first-time mothers screened in New Haven in 2011, 642 (56%) screened at low-risk for poor parenting. Of the low-risk families, 557 (87%) were offered Nurturing Connections services and of those offered, 183 (33%) accepted services. The rate of accepting Nurturing Connections is consistent with 33% reported for 2010; the rate is substantially lower than statewide (55%) and Hartford (43%). This may be due to employment of Nurturing Connections staff.

- As shown in Table 39, of the 504 mothers (44% of the total number of mothers screened) who screened at high-risk in New Haven, 478 (95%) were offered home visiting, and of those offered, 218 (46%) accepted and initiated home visiting services. The rate of initiating services increased substantially from rates in 2008 and 2009, 32% and 30% respectively. In addition, the rate of initiating home visiting services in New Haven is comparable to Hartford (78%). We looked at the steps in between offering and initiating home visiting to determine where families were "falling out" of the enrollment process. The percentage who initially agree to services is higher in New Haven (62%) compared to statewide (56%).

Table 38. Screening in New Haven, 2011

Total # of screens	1,146
# Low-risk	642
Offered Nurturing Connections	557 (87%)
Accepted Nurturing Connections	183 (33%)
# High-risk	504
Offered Home Visiting	478 (95%)
Accepted Home Visiting	294 (62%)
Initiated Home Visiting Services	218 (74%)

Table 39. Disposition of Families Identified as High-risk, New Haven Data, 2009-2011

	2009	2010	2011
# of positive screens	697	472	504
Offered Home Visiting	634 (91%)	413 (88%)	478 (95%)
Initiated Services	205 (32%)	125 (30%)	218 (46%)

Risk Profiles: New Haven Mothers' Kempe Scores, 2011

2011 New Haven Mothers' Kempe Scores on Individual Items

The Kempe Family Stress Inventory (Kempe) is scored across 10 items, with each item scored either 0 (no/low risk), 5 (moderate risk), or 10 (severe risk), to indicate presence and severity of past and current stressors. Each of these items, however, includes a larger set of criteria from which judgments are made, and these criteria provide a much better description of stress. As part of our research design in New Haven, we report on these data for families who scored in the severe range focusing on items with the highest rates of severe stress:

- Similar to the Hartford Kempe data, mothers scored in the severe range in New Haven most often on the Childhood History of Abuse and Neglect (34%), Multiple Stresses (28%), in addition to History of Crime, Substance Abuse, and Mental Health (19%) subscales.
- *Childhood History of Abuse/Neglect*: There were a total of 42 mothers who scored in the severe range on the Childhood History of Abuse and Neglect subscale. Of these mothers, 21 (50%) were either removed from their homes or abandoned as children. Twenty mothers (48%) were raised in a home with at least one alcohol/ drug addicted parent, seventeen mothers (40%) were raised by more than two families, thirteen mothers (31%) were raised in a home with no nurturing parent.

- *Multiple Stresses*: There were 34 mothers who scored in the severe range on the Multiple Stresses subscale. Twenty-two (65%) mothers described their living situation as stressful, nineteen mothers (56%) noted their finances caused much stress, and fourteen mothers (41%) moves frequently.
- Similar to Kempe Scores in Hartford, a considerable percentage of New Haven mothers scored moderate stress on other Kempe subscales. Eighty-three percent reported moderate or severe scores on Child Unwanted/ Poor Bonding, a total of 68% scored moderate to severe on the multiple stresses subscale, and a total of 62% of mothers scored moderate to severe range in the Low Self-esteem/ Social Isolation/ Depression subscale.

Families at Acute Risk

New Haven families report that families experienced very low rates of episodes of untreated mental health, domestic violence, or substance abuse when they entered the program as compared to families statewide and in Hartford. Three percent of New Haven mothers experienced acute issues at program entry compared to 7% statewide and 11% in Hartford. However, data indicate that 6% (not shown in tables) of New Haven families experienced acute stress, (domestic violence, substance abuse, or untreated mental health) at some point during the 2011 year, which is slightly higher than in Hartford (6%) and comparable to the statewide percentage (7.6%).

Table 40. New Haven Mothers' Kempe Scores, 2011

New Haven Mothers' Kempe Scores, 2011	0 Low	5 Moderate	10 Severe
Childhood History of Abuse/Neglect (N=122)	52%	13%	34%
Multiple Stresses (N=121)	32%	40%	28%
Low Self-esteem/ Social Isolation/ Depression (N=122)	39%	48%	14%
History of Crime, Substance Abuse, Mental Illness (N=121)	61%	20%	19%
Potential for Violence (N=120)	83%	9%	8%
CPS History (N=121)	86%	5%	9%
Child Unwanted/ Poor Bonding (N=124)	16%	81%	2%
Unrealistic Expectation of Child (N=120)	67%	32%	2%
Harsh Punishment (N=115)	96%	4%	0%
Negative Perception of Child (N=112)	95%	4%	1%

Home Visitation Families at Program Entry New Haven Data, 2011

Health Related Risk Factors

Health data provided in Table 41 indicate that:

- 14% of New Haven NFN children were born with a serious medical problem, a 5% decrease from last year's rate.
- 11% of children were born premature, a decline of rates reported for 2010; and 15% with low birth, consistent with 2010 rates.
- The rate of premature births in New Haven (11%) is equivalent to CT state rate of 11%. However, the rate of children born with low birth-weight (15%) is higher than

Prenatal Screens (N=188)	48%
Mother's Marital Status (N=143)	
Single, never married	89%
Married	7%
Divorced, separated, widow	4%
Mother's Race/Ethnicity (N=143)	
White	22%
Black	34%
Hispanic	36%
Other (includes multi-racial)	8%
Mother age at Baby's Birth (N=97)	
Under 16 years	6%
16-19 years	30%
20-22 years	28%
23-25 years	17%
26 years and older	20%
Median Age	22 yrs
Maternal Grandmother Living in the Household (N=150)	36%
Father Living in the Household (N=150)	37%
Father's Involvement W/ Child (N=74)	
Very involved	65%
Somewhat involved	14%
Sees child occasionally	8%
Very rarely involved	1%
Does not see baby at all	12%

Table 41. Pregnancy & Birth Information, New Haven Data, 2009-2011

Health Related Risk Factors	2009 N=167	2010 N=101	2011 N=112
Mother smoked cigarettes during pregnancy	5%	3%	4%
Mother drank alcohol during pregnancy	3%	3%	1%
Mother used illicit drugs during pregnancy	5%	5%	5%
Child born with serious medical problems	10%	19%	14%
Premature Birth (before 37 weeks gestation)	8%	17%	11%
Born Low Birth Weight (under 5 lbs 8 oz)	8%	15%	15%
Child has a Pediatrician	99%	98%	98%

the CT state percentage (12%)

Family and Household Data

32% of NFN mothers in New Haven are Black, and another 36% Hispanic, and 22% White. This is noticeably different from the racial breakdown statewide and in Hartford NFN sites. New Haven programs enroll more Black mothers (36%) compared to 20% statewide and 22% in Hartford. According to census data, 35.4% of New Haven residents are Black, so the program's population is more representative of the city's population.

- 48% of participating home visiting mothers were screened prenatally, as comparable with statewide and Hartford samples, 41% and 51%, respectively.
- 36% of participants were living with their mothers, compared to 38% statewide.
- 37% of New Haven fathers were residing in the households with NFN mothers and children, which is lower than the statewide rate of 45%.
- Rates of father involvement in New Haven were slightly higher than statewide (79% vs. 77% at least somewhat involved, respectively) at

program entry.

Financial and Social Risk Factors

- As shown in Table 43, home visitors considered 79% of mothers to have financial difficulties as reported by the home visitor (higher than 71% statewide).
- 31% of New Haven mothers were reported socially isolated (lower than 37% statewide).
- 12% of New Haven mothers had an arrest history compared to 18% statewide and 22% in Hartford.

Table 43. New Haven Mothers' Social Isolation, Arrest Histories & Financial Difficulties, 2011

Socially isolated (N=109)	31%
Arrest history (N=115)	12%
Financial difficulties (N=107)	79%
Receiving TANF (N=119)	15%
Receiving Food Stamps (N=119)	31%

Education and Employment Rates at Program Entry

New Haven Data, 2011

New Haven NFN 2011: Mothers' Life Course Information

Mothers' education and employment data are presented in Table 44, separating mothers who were 19 years or younger when they had their child from those who were 20 years and older.

- 60% of the younger cohort of mothers had less than a high school education at program entry (lower than 68% statewide). Of the 20 young mothers who had not yet graduated high school, 13 (65%) were enrolled in middle or high school. In comparison to the statewide population, the older cohort in New Haven had on average slightly less education: 26% and 18% respectively; 41% had at least some post secondary education in New Haven compared to 49% among the statewide population.
- Rates of employment for the younger cohort of New Haven mothers (9%) were comparable to the statewide population (10%). The rates of employment for the older cohorts in New Haven (35%) and the older cohorts Statewide (38%) were also comparable.

New Haven NFN 2011: Fathers' Life Course Information

The data in Table 45 should be interpreted with caution; home visitors often rely on mothers to provide information. Also, analyses are based on a small sample size (~13 for the younger cohort and ~40 for the older cohort) and may not be representative of all fathers.

- For the younger cohort, 93% of the 13 fathers had less than a high school education and 5 fathers or 31% of those fathers were enrolled in school; 32% of the 38 older fathers had less than a high school education and 18% of older fathers had at least some post secondary education.
- About 5 out of 13 younger New Haven fathers were employed (62%) compared to 70% or 33 of the 47 older fathers.
- 43% of the 7 younger fathers in New Haven and 14 (40%) of the 35 older New Haven fathers had an arrest history.
- 2 of the 33 older fathers were incarcerated at the time of program entry in New Haven. None of the 8 younger fathers were incarcerated.

Table 44. Mothers' Life Course, New Haven Data, 2011

Mother Life Course Indicators	19 and younger	20 and older
Education	(N=33)	(N=62)
Eighth grade or less	18%	10%
More than 8 th grade, < high school	42%	16%
High school degree or GED	24%	34%
Some vocational training/college	15%	31%
College degree or graduate work	0%	10%
Enrolled in School	(N=30)	(N=60)
Yes	51%	7%
Employment Status	(N=33)	(N=62)
Mother not employed	91%	65%
Mother employed	9%	35%
Full-time	3%	16%
Part-time job or occasional work	6%	11%
Employed Prior to Pregnancy	(N=34)	(N=59)
Yes	15%	78%

Table 45. Fathers' Life Course, New Haven Data, 2011

Father Life Course Indicators	19 and younger	20 and older
Education	(N=13)	(N=38)
Eighth grade or less	8%	8%
More than 8 th grade, < high school	85%	24%
High school degree or GED	8%	50%
Some vocational training/college	0%	5%
College degree or graduate work	0%	13%
Enrolled in School	(N=13)	(N=41)
Yes	38%	10%
Employment Status	(N=13)	(N=47)
Father not employed	62%	30%
Father employed	38%	70%
Full-time	14%	41%
Part-time job, occasional work, Or working more than one job	14%	10%
Fathers With an Arrest History	(N=7)	(N=35)
Yes	43%	40%
Currently Incarcerated	(N=8)	(N=33)
Yes	0%	6%

Home Visitation Participation, New Haven Data, 2011

Table 46. New Haven Program Participation, 2009-2011

	2009 N=493	2010 N=435	2011 N= 487
Average # of attempted home visits	2.7	2.9	2.9
Average # of completed home visits	2.0	2.2	2.1
Average # of office/out of home visits	0.1	0.1	0.1
Average # of NFN social events attended	0.1	0.1	0.1
Total # of visits completed	2.2	2.4	2.3

Figure 9. Six Month, 1 Year, and 2 Year Retention Rates By Year of Program Entrance, New Haven Data

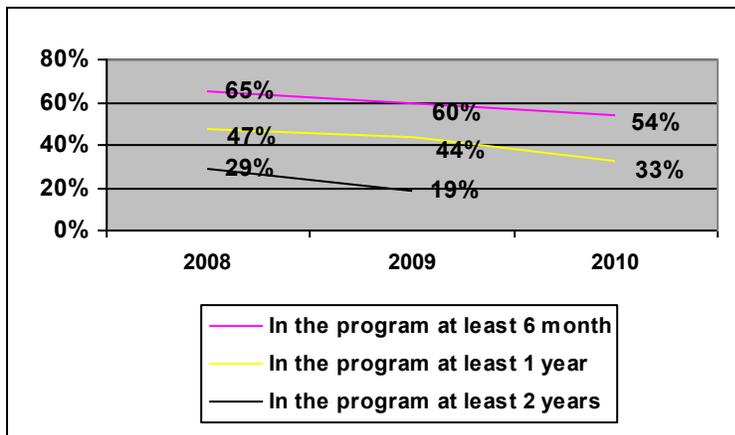


Table 47. Reasons New Haven Families Leave Home Visiting, 2009-2011

	2009 N=243	2010 N=179	2011 N=177
Family moved out of service area	14%	13%	16%
Unable to locate mother	42%	39%	32%
Discharged, family was noncompliant	0%	0%	0%
Family decided to discontinue services	13%	12%	8%
Mother is working or in school full-time, no time for home visits	16%	21%	10%
Goals were met/family graduated	2%	2%	1%
Baby removed from home by DCF	3%	2%	1%
Discharged, family was not appropriate for the program	1%	0%	0%
Other family member did not approve of services	<1%	1%	<1%
Home visitor left the program	3%	6%	8%
Other	6%	4%	14%

Participation Rates

- Similar to the statewide and Hartford populations, families in New Haven, on average, receive 2 visits per month (see Table 46) out of an average of 3 attempts. These data have remained consistent over the past 3 years.

Program Retention Rates

- Six month and 1 year retention rates for New Haven families are presented in Figure 9. Similar to statewide and Hartford, there was a decrease in retention for the 2010 cohort compared to the 2008 and 2009 cohort. For families starting the program in 2010, 54% were active at least 6 months and 33% were active at least 1 year. Going back to 2009 for the two year retention rate, 19% of participants were active at least 2 years. As such, the retention rate since 2008 has similarly decreased with the Statewide and Hartford NFN Home Visiting sites.

Reasons Families Leave the Program

As shown in Table 47, New Haven families ended NFN home visiting services in 2011 because:

- 32% of families relocated without informing staff or the staff were unable to locate family at their known address. This rate is comparable to statewide (33%).
- 16% of families moved out of the service area and informed NFN staff.
- An additional 10% left the program because they were working or in school and did not have time for home visits.
- 8% of families left the program for unspecified reasons.

Utilization of Community Resources New Haven Parent Outcomes, 2011

Community Life Skills Scale (CLS): New Haven Outcomes

Data on the Total CLS scale, and each of the subscales were analyzed (in a repeated measure analysis of variance) for mothers active for 6 months (N=95), 1 year (N=59), and 2 years (N=21) as of the end of 2011.

- After six months (N=95), significant improvements were documented on the Budgeting, but not on the total CLS score.
- Participants in the program for 1 year (N=59) also showed significant improvement in the area of support services and transportation, but

not on the total CLS score.

- Statistically significant improvement was seen for 2 year (N=21) participants on the support/Involvement subscale. These data indicate that New Haven NFN participants have a friend or confidant that they can confide in after 2 years of participation.

Table 48. Change in Mean Scores on the Community Life Skills Scale 6 Month, 1 Year, and 2 Year Participants, New Haven, 2011

Community Life Skills	Entry (N=95)	6 Months		
Total	24.1	24.7		
Transportation	3.4	3.4		
Budgeting	3.2	3.6**		
Support services	4.2	4.3		
Support/Involvement	4.2	4.5		
Interests/Hobbies	2.8	2.8		
Regularity/Organization/Routines	6.7	6.6		
Community Life Skills	Entry (N=59)	6 Months	1 Year	
Total	23.9	24.7	25.2	
Transportation	3.4	3.4	3.6*	
Budgeting	3.1	3.5	3.8	
Support services	4.2	4.2	4.3**	
Support/Involvement	4.12	4.6	4.6	
Interests/Hobbies	2.8	2.9	2.9	
Regularity/Organization/Routines	6.8	6.5	6.8	
Community Life Skills	Entry (N=21)	6 Months	1 Year	2 Year
Total	24.7	26.5	24.7	27.2
Transportation	3.3	3.5	3.5	3.6
Budgeting	3.3	3.7	3.7	3.9
Support services	4.3	4.4	4.3	4.7
Support/Involvement	4.7	5.1	4.5	5.5**
Interests/Hobbies	3.0	3.3	2.8	3.1
Regularity/Organization/Routines	6.8	6.7	6.7	7.0
*p<.05 **p<.01 ***p<.001				

Change in Mothers' Life Course Outcomes, New Haven Data, 2011

Home visitors administer a questionnaire annually for each family active in the program on life course outcomes. As shown in Table 49 change in each of the life course outcomes was analyzed separately (in a repeated measures analysis of variance) for mothers who completed questions at 6 months (2010-2011), 1 year (2010-2011) and two years (2009-2011). (Note: Different N size is due to missing/unknown data.)

Education, Employment, Independent Living

- Mothers who received 6 months of NFN services reported receiving at least a high school education; 63% after 6 months, compared to 55% of mothers at entry.

Financial Difficulty and Support

- Financial difficulties as reported by the Home Visitor decreased after one year of participation.
- Mothers receiving WIC increased significantly after 2 year participation.

Table 49. Change in Mothers' Life Course Outcomes for 6 Month, 1 & 2 Year Participants, New Haven Data					
Mothers' Living Circumstances: 2010-2011	N	Entry	6 Month		
Mothers with at least a high school education	51	55%	63%*		
Mothers employed	51	20%	18%		
Mothers employed full-time	60	8%	7%		
Mothers enrolled in school	53	36%	26%		
Mothers experiencing financial difficulties	45	82%	69%		
Mothers socially isolated	48	38%	31%		
Mothers living independently of family	52	25%	27%		
Mothers receiving TANF	54	6%	11%		
Mothers receiving Food Stamps	51	22%	29%		
Mothers receiving WIC	51	75%	80%		
Mothers' Living Circumstances: 2010-2011	N	Entry	6 Month	1 Year	
Mothers with at least a high school education	18	72%	72%	83%	
Mothers employed	19	21%	32%	32%	
Mothers employed full-time	23	13%	13%	17%	
Mothers enrolled in school	19	16%	16%	16%	
Mothers experiencing financial difficulties	17	71%	47%	41%*	
Mothers socially isolated	18	33%	28%	22%	
Mothers living independently of family	19	47%	37%	58%	
Mothers receiving TANF	18	6%	11%	17%	
Mothers receiving Food Stamps	18	22%	22%	28%	
Mothers receiving WIC	19	79%	74%	79%	
Mothers' Living Circumstances: 2009-2011	N	Entry	6 Month	1 Year	2 Year
Mothers with at least a high school education	20	70%	80%	70%	60%
Mothers employed	21	29%	38%	33%	38%
Mothers employed full-time	24	4%	13%	8%	17%
Mothers enrolled in school	21	19%	14%	24%	38%
Mothers experiencing financial difficulties	17	82%	71%	65%	71%
Mothers socially isolated	19	47%	32%	16%	11%
Mothers living independently of family	21	14%	14%	14%	28%
Mothers receiving TANF	21	5%	5%	10%	20%
Mothers receiving Food Stamps	19	11%	26%	22%	33%
Mothers receiving WIC	19	74%	100%	100%	100%**
*p<.05 **p<.01 ***p<.001					

Change in Fathers' Life Course Outcomes, New Haven Data, 2011

Father Life Outcomes

As already noted, our data on fathers are limited primarily because information is often collected voluntarily from the mothers if fathers are not part of the home visits. For this reason, these data should be interpreted with caution. The data on fathers include responses from fathers participating in home visiting services in addition to mothers reporting on behalf of fathers.

- Separate analyses were conducted for families receiving 6 months, 1 year, and 2 years by the end of 2011.
- The percentage of fathers obtaining employment increased after 6 months of participation, and was seen higher after 1 year, but appeared to decrease after 2 years in the program.

Fathers' Living Circumstances, 2010-2011	N	Entry	6 Month		
Fathers with at least a high school education	27	52%	48%		
Fathers employed	40	50%	73%**		
Fathers with financial difficulties	18	72%	61%		
Fathers socially isolated	17	24%	6%		
Fathers at least somewhat involved with their children	30	63%	73%		
Fathers' Living Circumstances, 2010-2011	N	Entry	6 Month	1 Year	
Fathers with at least a high school education	12	42%	67%	67%	
Fathers employed	25	68%	72%	80%	
Fathers with financial difficulties	15	67%	60%	60%	
Fathers socially isolated	15	20%	7%	13%	
Fathers at least somewhat involved with their children	19	89%	79%	79%	
Fathers' Living Circumstances, 2009-2011	N	Entry	6 Month	1 Year	2 Year
Fathers with at least a high school education	10	70%	80%	70%	70%
Fathers employed	14	79%	64%	71%	64%
Fathers with financial difficulties	8	75%	88%	88%	88%
Fathers socially isolated	8	13%	0%	0%	0%
Fathers at least somewhat involved with their children	11	82%	73%	64%	73%
*p<.05 **p<.01 ***p<.001					

Changes in Parenting Attitudes, New Haven Outcomes, 2011

In Table 51, we present outcome data on the Child Abuse Potential Inventory Rigidity Subscale (CAPI-R), a self-report scale that measures attitudes and beliefs about the appearance and behavior of children. A significant decrease on the Rigidity subscale reveals that a mother is less likely to feel that her children should *always* be neat, orderly, and obedient. Mothers who have less rigid expectations of their children are less likely to treat their children forcefully.

The average score for a normative population on the CAPI-R is 10.1 with a standard deviation of 12.5. The cut off score on the CAPI-R is 30, with 5% of the general population scoring at or above this score.

Child Abuse Potential Inventory, Rigidity Subscale (CAPI-R): New Haven Outcomes

- The average CAPI-R score at program entry in 2011 for New Haven mothers was 30.2, and was also greater than the entry mean statewide (26.6) and almost equivalent with Hartford (29.9).

- At program entry, 53% of New Haven mothers scored at or above the cutoff score of 30, compared to 42% statewide and 50% in Hartford.
- Similar to the statewide and Hartford samples, we ran separate outcome analyses for New Haven participants who scored above the CAPI-R cut-off score at program entry and those who scored below the cut-off. The results of these analyses were similar to the statewide and Hartford analyses. While significant changes for parents who scored below the cut-off at entry were not found, parents with scores at or above the cut-off at program entry made significant decreases in their rigid parenting attitudes over time. Scores fell below the cut-off after 1 year and 2 year participation in the Home Visiting program.

Table 51. Change in Means Scores on the Child Abuse Potential Inventory Rigidity Subscale for 1 and 2 Year Participants by Entry CAPI-R Score, New Haven Data, 2011

CAPI Rigidity Scores 2010-2011	Scored Below Cut-Off at Entry (N=27)		Scored At or Above Cut-Off at Entry (N=29)					
	Entry	6 Month	Entry	6 Month				
Rigidity	14.5	16.6	42.4	33.4**				
CAPI Rigidity Scores 2010-2011	Scored Below Cut-Off at Entry (N=15)			Scored At or Above Cut-Off at Entry (N=18)				
	Entry	6 Month	1 Year	Entry	6 Month	1 Year		
Rigidity	10.4	11.8	13.3	44.5	37.0	28.31***		
CAPI Rigidity Scores 2009-2011	Scored Below Cut-Off at Entry (N=12)				Scored At or Above Cut-Off at Entry (N=11)			
	Entry	6 Month	1 Year	2 Year	Entry	6 Month	1 Year	2 Year
Rigidity	19.2	15.4	16.6	15.9	40.2	33.7	28.6	23.0

* p<.05 ** p<.01 *** p<.001

Section 4

Home Visitation for Fathers

In this fourth section, we describe the demographic and risk profiles for fathers participating in home visitation. Data on program participation, beliefs about the roles of fathers, and outcomes are also presented. Below is a summary of findings.

Demographic and Risk Profile

- For all fathers actively participating in Home Visitation (total 91 entries), sixty-percent of father participants are Black, 30% are Hispanic, and 5% are White. Sixty– five percent of fathers had completed their high school education, and 44% were employed.
- Risk profiles indicate that NFN staff have recruited a high-risk population of fathers. Sixty-eight percent of fathers had a history of crime, substance abuse, or mental illness. Since the implementation of the fathering with home visiting services, the average score on the CAPI -R for entering fathers is 28.2 on the which is within 1 standard deviation from the cut-off point ($N= 81$, $SD= 15.42$).

Beliefs about the Roles of Fathers

- The Role of the Father Questionnaire instrument indicated that most participants believed that fathers play a pivotal role in raising their children, a role as important as mothering. Because this instrument was introduced after the fathering home visiting project began, our sample size (24) is still fairly small.

Program Participation

- Fathers typically receive two home visits out of an attempted three, which is comparable to the NFN statewide population.
- In 2011, 64% of fathers remained in the program at least six months, and 36% remained in the program for at least one year. Another 17% of the fathers who initiated services in 2009 continued services after 2 years.
- The most frequently noted reason fathers leave the program is due to families decision to discontinue home visiting services.

Preliminary Outcomes

- Although sample sizes for the six month and one year outcomes were too small to statistically analyze rigid parenting attitudes, we do see change over time. After six months, fathers who answered the items on the CAPI-R scored higher on parental rigidity the total number of fathers who were measured at entry, however, for fathers who remained after 1 year of participation, the average score was 18.7, less than the average reported at entry and 6– months.
- Knowledge and use of community resources were analyzed for fathers participating in 2011 at entry and after 6 months (paired t-test analysis). Although there were no significant differences, improvements are seen in the total score as well as on subscales.

Research Going Forward

- The Center for Social Research is conducting a process evaluation of the Home Visiting Model for fathers– will continue to discuss.

Home Visitation for Fathers: Demographic Profile of Fathers at Program Entry 2011

Fathering Home Visiting:

While fathers have always been invited to participate in home visits, NFN home visiting services have typically been geared toward mothers. In October 2008, a Fatherhood Subcommittee was convened with the goal of re-designing traditional NFN home visiting services to be more father-friendly. On March 1, 2009, a home visiting pilot for fathers officially began in five NFN sites, including four sites in New Haven and one site in Torrington. Males were hired as home visitors and services were offered to fathers of already enrolled NFN children. Subsequently, services were also offered to fathers of children that were not already enrolled in NFN services. The structure of home visits for fathers are comparable to standard NFN home visits: services are offered on a weekly basis, parenting curricula are used, and parent-child interaction is modeled. In this section, we present data on program participants, including a demographic and risk profile, a description of services received, and preliminary outcomes.

Demographic Profile

As of the end of 2011, 91 fathers had received home visits at 10 sites. A demographic profile of these fathers at program entry are provided in Table 52. (Note: Different N sizes are due to missing data or information.)

- 32% of fathers were under the age of 20 when they entered the program.
- Three-fifths or 60% of fathers were Black, less than a third or 30% of fathers reported Hispanic, and 5% of fathers reported White.
- 65% of fathers had completed high school, with 12% having some post-secondary education.
- 44% of fathers were employed, only 14% full-time. Moreover, 82% were reported to be struggling financially.
- Home visitors considered 21% of the fathers to be socially isolated.
- Almost all (94%) fathers were at least somewhat involved with their child at program entry.
- Slightly over one-third (36%) of enrolled fathers had an arrest history.

Table 52. Demographic Characteristics of Fatherhood Pilot Participants at Program Entry (N=91)	%
Father's Age (N=53)	
Under 16 years	4%
16-19 years	28%
20-22 years	21%
23-25 years	17%
26 years and older	30%
Median	
Father Race/Ethnicity (N=72)	
Black	60%
Hispanic	30%
White	5%
Other	5%
Language Father Speaks (N=72)	
English	74%
Spanish	11%
English and Spanish	13%
Other	2%
Father's Highest Level of Education Completed (N=68)	
Eighth grade or less	3%
More than 8 th grade, < than HS	32%
High school degree or GED	49%
Vocational training or some college	12%
College degree or graduate work	4%
Father's Employment Status (N=72)	
Not employed	56%
Employed	44%
Full-time	14%
Part-time, occasional work, or more than one job	24%
Fathers Enrolled in School (N=71)	25%
Fathers with Financial Difficulties (N=72)	82%
Fathers Socially Isolation (N=72)	21%
Father's Involvement with Child (N=72)	
Very involved	80%
Somewhat involved	14%
Does not see baby at all	2%
Fathers with an Arrest History (N=72)	36%

Home Visitation for Fathers: Risk Profile, 2011

Risk Profile

Kempe Family Stress Inventory

We assessed parental stress using the Kempe Family Stress Inventory for fathers participating in Home Visiting Services in 2011.

- The most stress was seen on History of Crime, Substance Abuse, and Mental Illness Subscale with 26% of fathers scoring in the severe range.
- 20% of participating fathers scored as severe on the Multiple Stresses subscale.
- History of Child Abuse and Low Self-Esteem/ Social Isolation/ Depression Inventory subscale scores show 11% of entering fathers in severe range.

Additionally, a substantial percentage of fathers participating in Home Visiting scored moderate on the following subscales: Child Unwanted/ Poor Bonding (85%) Multiple stresses (70%), Low Self-Esteem/ Social Isolation/ Depression (68%), and History of Crime, Substance Abuse, Mental Illness (42%).

Table 53. Fathers' Kempe Scores, 2011

	0 Low	5 Moderate	10 Severe
Childhood History of Abuse/Neglect (N=19)	68%	21%	11%
Multiple Stresses (N=20)	10%	70%	20%
Potential for Violence (N=19)	84%	11%	5%
History of Crime, Substance Abuse, Mental Illness (N=19)	32%	42%	26%
Low Self-esteem/ Social Isolation/ Depression (N=19)	21%	68%	11%
CPS History (N=19)	95%	5%	0%
Negative Perception of Child (N=18)	72%	28%	0%
Harsh Punishment (N=19)	95%	5%	0%
Unrealistic Expectation of Child (N=19)	68%	32%	0%
Child Unwanted/ Poor Bonding (N=20)	15%	85%	0%

Home Visitation for Fathers: Beliefs about the Roles of Fathers 2009-2011

The Role of the Father Questionnaire

The Role of the Father Questionnaire (ROFQ) is a self-report inventory that assesses someone's beliefs on how important the role of fathering is to raising a child. Scores on the ROFQ range from 15 to 75, with higher scores reflecting belief in a high level of involvement with and a strong emotional relationship to children. Participants in the fathering home visiting program complete the ROFQ at program entry, six months, then annually. We began using the ROFQ a few months after the fathering home visiting pilot began, and thus we have a smaller sample of fathers who have completed this form at program entry. At this point, we have pre-test data on the ROFQ for fathers participating in NFN Home visiting services.

Program entry data from the 24 fathers who completed the ROFQ at program entry are presented in Table 54. The majority of participating fathers believe they are as important in raising children as mothers are. For example, all of the fathers agreed (either strongly or moderately) that it is as important for fathers to meet the psychological needs of their children as it is for mothers and that the most important thing a man can invest time and energy into is his child(ren). The items that showed more variation include: fathers having difficulty being affectionate with their babies; mothers being more sensitive caregivers than fathers; the responsibilities of fatherhood never outweighing the joys; and fathers being able to enjoy children more as they grow older.

Table 54. Father Responses on the ROFQ at Program Entry (N=24)	Agree strongly	Agree moderately	Neither agree or disagree	Disagree moderately	Disagree strongly
It is essential for the child's well being that fathers spend time interacting and playing with their children.	92%	8%	0%	0%	0%
It is difficult for men to express tender and affectionate feelings toward babies.	13%	4%	21%	25%	37%
Fathers play a central role in the child's personality development.	78%	13%	9%	0%	0%
The responsibilities of fatherhood never overshadow the joys.	36%	32%	14%	4%	14%
Fathers are able to enjoy children more when the children are older and don't require as much care.	13%	13%	13%	17%	44%
Very young babies are generally able to sense an adult's moods and feelings. For example, a baby can tell when you are angry.	38%	37%	17%	4%	4%
Very young babies are affected by adults' moods and feelings. For example, if you are angry with a baby he/she may feel hurt.	67%	21%	12%	0%	0%
The most important thing a man can invest time and energy into is his family.	79%	17%	4%	0%	0%
A father should be as heavily involved in the care of a baby as the mother is.	81%	9%	5%	5%	0%
Mothers are naturally more sensitive caregivers than fathers are.	29%	19%	29%	9%	14%
Even when a baby is very young it is important for a father to set a good example for his baby.	86%	9%	5%	0%	0%
It is as important for a father to meet a baby's psychological needs as it is for the mother to do so.	81%	19%	0%	0%	0%
It is important to respond quickly to a young baby each time it cries.	57%	14%	24%	5%	0%
The way a father treats his baby in the first six months has important life-long effects on the child.	75%	10%	15%	0%	0%
All things considered, fatherhood is a highly rewarding experience.	81%	19%	0%	0%	0%

Home Visitation for Fathers: Program Participation 2009-2011

Program Participation

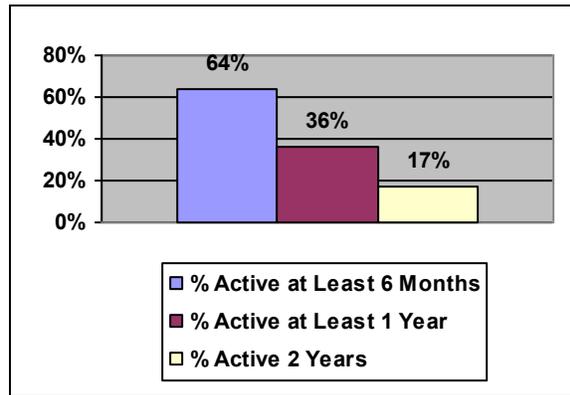
As shown in Table 55, fathers were visited in the home, on average, twice per month out of an attempted 3 visits. Including visits that take place outside of the home and social events, fathers were seen 2.5 times per month in 2011. Fathers receive more visits outside the home (0.4) as compared to mothers (0.1).

Table 55. Fathering Home Visitation: Frequency of Home Visits and Program Participation, 2009-2011	2009 N=31	2010 N=40	2011 N=64
Average # of attempted home visits	3.2	3.1	3.0
Average # of completed home visits	2.0	1.9	1.8
Average # of office/out of home visits	0.4	0.6	0.4
Average # of NFN social events attended	0.2	0.3	0.3
Total # of contacts	2.6	2.8	2.5

Program Retention Rates

Retention rates for fathers are presented in Figure 10. 64% of fathers remained in the program for at least six months, which is higher than the rate for NFN mothers (60%). For fathers who entered the program before 2010, 36% were active at least 1 year, which is lower than the rate for NFN mothers (44%). This is the first year to assess 2-year retention, 17% of fathers remained in the program as of program entry in 2009 compared to 26% of mothers.

Figure 10. Retention Rates for Fathering Home



Reasons Fathers Leave NFN

Twenty-one fathers left the NFN fathering project in 2011.

- 14% discontinued services because their home visitor left the program and they did not want to continue services with a female home visitor. This rate is much higher than the 4% noted for mothers in the home visiting program, and may indicate the importance of male home visitors in engaging fathers.
- 19% left because they moved and did not inform program staff or staff could not reach them at their known address (compared to 33% of mothers).
- 14% left because they did not have time for home visits (half the rate of mothers).
- 14% left due to unspecified reasons (comparable to mothers).

Visiting Participants

Table 56. Reasons Fathers Left the Program	N=21
Family moved out of service area	10%
Unable to locate father	19%
Discharged, family was noncompliant	0%
Family decided to discontinue services	29%
Is working or in school full-time, no time for home visits	14%
Goals were met/family graduated	<1%
Baby removed from home by DCF	0%
Discharged, family was not appropriate for the program	0%
Other family member did not approve of services	0%
Home visitor left the program	14%
Other	13%

Home Visitation for Fathers: Preliminary Outcomes 2009-2011

Community Life Skills Scale

- The Community Life Skills (CLS) scale is a self-report standardized instrument that measures someone's knowledge and use of resources in his/her community. The CLS produces an overall score as well as scores on six subscales: Transportation, Budgeting, Support Services, Support Involvement, Interests/Hobbies, and Regularity/Organization/Routines. The overall (Total) score on the CLS ranges from 0-33, with higher scores indicating more effective use of community resources.
- Program entry and six month outcome data were available for eleven fathers by the end of 2011. These data are presented in Table 53. Please note, no tests of significance were run on these outcome data due to the small sample size.
- There were small increases in the total CLS score as well as in the Budgeting, Support Services and Support/ Involvement from program entry to six months.

N=11	Entry	6 Months
Total	22.6	24.4
Transportation	3.5	3.4
Budgeting	2.4	3.6
Support services	4.3	4.6
Support/Involvement	3.9	4.6
Interests/Hobbies	3.0	2.5
Regularity/Organization/Routines	6.1	6.0

Child Abuse Potential Rigidity Subscale

- The Child Abuse Potential Inventory (CAPI) is a self-report standardized instrument designed to measure someone's potential to abuse or neglect a child. We use the Rigidity Subscale of the CAPI (CAPI-R) to assess changes in rigid parenting attitudes over time. A significant decrease on the Rigidity subscale reveals that a parent is less likely to feel that their children should *always* be neat, orderly, and obedient. Parents who have less rigid expectations of their children are less likely to treat their children forcefully.
- As of the end of 2011, fathers scored 28.2 (N=81) on CAPI-R at program entry, 46 fathers scored 29.7 after 6 months of participation and 12 fathers scored 18.7 after one year of NFN Home visiting participation. Please note: no test of significance were run on these outcome data due to the small sample size.
- There was a sizeable decrease in rigidity scores from program entry to 1 year for father participants, however after 6 months of participation, there was very little difference.

<i>Fathers entering program in 2010</i>	Entry (N= 81)	6 Month (N=46)	1 Year (N=12)
Mean Rigidity Score	28.2	29.7	18.7