

## Introduction

Engaging and retaining mothers in home visiting is one of the paramount challenges facing the field. Seeing mothers early, often, and consistently are foundational principles of most home visiting models. Although research findings are mixed, there is evidence for a dose-response relationship between number and intensity of home visits and outcomes. Yet, a large proportion of mothers leave home visiting prematurely. Most mothers who drop out are lost to contact, and as a result little is known about why they were unable or disinterested in continuing. Understanding why mothers drop out prematurely is essential to develop new strategies and approaches to engage and keep mothers in home visiting long enough to fully benefit from services.

## Method

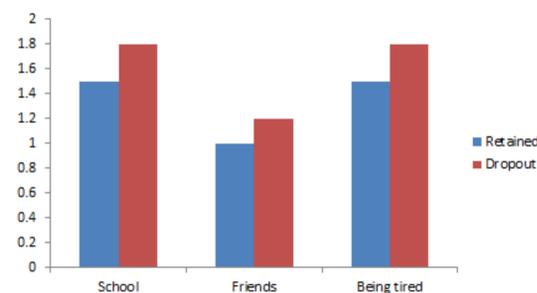
Data for these analyses were drawn from 137 of 232 mothers who participated in a study of retention involving four sites in a regional, multi-state home visiting program. The four sites were divided equally between HFA and NFP models. Mothers received in-home assessments at enrollment, 9 months post-enrollment, and 18 months post-enrollment. Mothers were assessed if they remained in or dropped out of home visiting. The sample retention in the study was high (94.1%). At 18 months post-enrollment, 51.4% of mothers had dropped out of home visiting prematurely. A survey of mothers' experiences in home visiting were administered to 90 mothers who dropped out by 18 months and 37 who were retained beyond this point. The survey consisted of 45 items organized under seven categories reflecting reasons for why mothers

## Method (cont.)

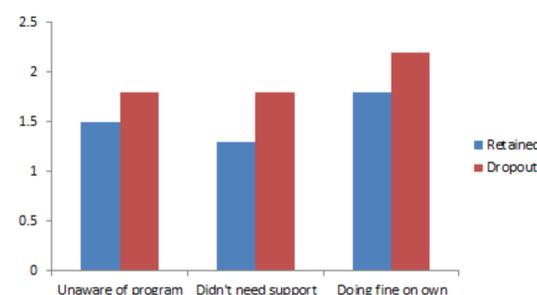
might stay or leave the program: *logistical barriers, invasiveness, confusion about program, pressured to participate, support, mismatch, and satisfaction with program*. Each item was endorsed using a 4-point Likert scale indicating agreement (4)/disagreement (1).

23. I didn't want to see the home visitor any longer, but a family member said I must.
24. I didn't want to see the home visitor any longer, but a health care worker said I must.
- Subscale 5**
25. I felt the home visitor wanted to come over too often.
26. I didn't need any more support or encouragement from my home visitor.
27. I didn't think my home visitor could teach me anything new.

### It was hard to meet because of...



### Program Features

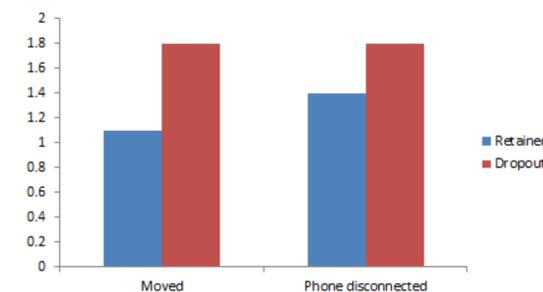


## Results

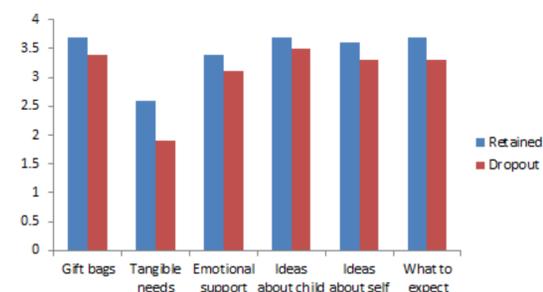
There were no differences between retained and dropped out mothers on age, race, birth status at enrollment, home visiting model, or history of childhood trauma. Mothers who dropped out had higher scores on the Beck Depression Inventory-II at enrollment (13.4 vs. 10.5,  $p < .05$ ).

The graphs below show statistically significant ( $p < .05$ ) and statistically trending ( $p < .10$ ) endorsements by retained and dropped out mothers on survey items. Dropped out mothers indicated that it was harder to find time to meet with home visitors because of school ( $p < .10$ ),

### Other Logistics



### Saw value in....



## Results (cont.)

friends ( $p < .05$ ), and being tired ( $p < .10$ ). They also were more likely to move ( $p < .05$ ) or have a phone disconnected ( $p < .05$ ). Dropped out mothers were more likely to state that they were unaware up front how often home visitors would visit the home ( $p < .10$ ). Dropped out mothers were also less likely to see value in home visiting or to see the home visitor as providing helpful or useful support. Specifically, they noted that they were less in need of home visitor support ( $p < .05$ ), they were doing fine without home visiting ( $p < .05$ ), saw less value in the program's monthly gift bags ( $p < .10$ ), found that home visitors were less helpful in obtaining tangible items ( $p < .05$ ), provided less emotional support than desired ( $p < .05$ ), and provided less helpful ideas on taking care of the child ( $p < .05$ ), taking care of oneself ( $p < .05$ ), or what to expect from the developing child ( $p < .05$ ).

## Summary

Most mothers endorsed multiple reasons for staying and leaving. Dropouts were more likely to see less value in home visiting and to struggle to find times to meet. Importantly, poor relationship with home visitor, concerns about child abuse reporting, and family interference were infrequently endorsed. Findings are consistent with qualitative and quantitative studies that a sizable proportion of mothers do not see home visiting as meeting their needs.

## Acknowledgments

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