



THRIVE Evaluation: Evaluation Plan and Preliminary Analysis

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Why Evaluate?

- **Identify implementation issues needing attention / remediation**
 - Always likely in new, innovative programs involving multiple partner agencies
 - Data integrity is always an issue in community data collection
- **Measure outcomes for the women and babies involved**
 - Improved birth outcomes
 - Lower infant mortality rate
 - Healthier family outcomes



Current Evaluation Plan

- **Overall evaluation: Collect de-identified data from program participants at each CHW visit**
 - Forms based upon Northeast Ohio HUB model
 - CHW collects and records the data
- **Also collect data from a sub-sample of 8 women interviewed every three months for 18 months**
 - Falletta and Leahy interview the women
- **Women must consent to be in the research study in both studies – approved by KSU IRB**

Future Evaluation Plan

- **CHW's collect data using Northeast Ohio HUB forms and electronic data entry**
- **Northeast Ohio will provide the evaluators de-identified electronic records for conducting the same overall evaluation previously described**
 - ALL participants will now be included in the evaluation.
- **Smaller personal interview study remains the same**



THRIVE Preliminary Data

THRIVE Evaluation Enrollment by Agency

- 68 women have enrolled in the THRIVE evaluation as of June

Agency	Number and Percent of THRIVE clients
Access Health Stark County	28 (42.6%)
Alliance Family Health Center	16 (23.5%)
Stark County Health Department (KOBA)	7 (10.3%)
YWCA - Canton	16 (23.5%)

THRIVE Participant Characteristics

Variable	Percent of THRIVE clients
Age - Mean (SD)	24.9 years (5.1)
Race	
Black or African American	45.6%
White	47.1%
American Indian/Alaska Native	1.5%
Native Hawaiian or Other Pacific Islander	1.5%
Unspecified/Hispanic or Latina	4.4%
Ethnicity (N=62)	
Hispanic or Latina	27.4%
Insurance (N=67)	
Medicaid	92.5%
None	4.5%
Employer-Provided	3.0%



THRIVE Participant Characteristics

Variable	Percent of THRIVE clients
Pregnancy intended (N=61)	27.9%
Gestational age at first encounter Enrolled before birth (N=55) Enrolled after birth (N=8)	24.6 weeks (SD=9.1) 5.8 months (SD=4.6)
Type of current prenatal care (N=68) Traditional Centering Pregnancy Future appointment made None Client intake after birth Client miscarried	76.5% 1.5% 5.9% 2.9% 11.8% 1.5%
First received prenatal care (enrolled prior to birth) (N=46)	10.4 weeks (SD=5.1)

THRIVE Participant Characteristics

Variable	Percent of THRIVE clients
Baby's father is important part of life (N=62)	61.3%
Social support from mother, aunt, sister, etc. (N=61)	82.0%
Past 12 months, domestic violence (N=65)	13.8%

THRIVE Participant Characteristics

Variable	Percent of THRIVE clients
Current tobacco use (N=64)	35.9%
Living with someone who smokes (N=67)	41.8%
Any alcohol use since pregnancy (N=68)	8.8%
Past 6 months illegal substances (N=68)	7.4%
Past 2 weeks, more than half/nearly every day: (N=64)	
Little pleasure or interest in doing things	23.4%
Feeling down, depressed or hopeless	23.5%
Current substance abuse treatment (N=64)	7.8%
Current mental health treatment (N=65)	24.6%

THRIVE Participant Characteristics

Variable	Percent of THRIVE clients
Underweight/overweight before getting pregnant (N=56)	23.2%
Folic acid prior to pregnancy (N=62)	14.5%
Delivered in past 18 months (N=55)	32.7%
Prior pre-term birth (N=51)	21.6%
Prior low birth weight (N=51)	13.7%
Folic acid now (N=59)	13.6%
Taking prenatal vitamins (N=65)	81.5%

Qualitative Study

- **2 of 8 women have been enrolled – currently looking for eligible THRIVE participants**
- **Diverse life experiences**
 - Difficulties with housing, finances, employment
 - Needs for financial management/budgeting/saving and childbirth education
- **Very satisfied with CHWs and the comprehensive approach they take in meeting health and social needs**
 - “Goes out of the way to make sure my kids are OK”
 - “Gives words of encouragement”
 - “Goes above and beyond on small things – makes my concerns hers”