



Healthy Child Manitoba Office

Healthy Baby Programs

Participant Satisfaction



December 2009

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REPORT PURPOSE AND OVERVIEW

In June of 2004, Healthy Child Manitoba Office started collecting information about the Healthy Baby Program and program participants. Data collection includes:

- "We're Glad You are Here" forms
- Attendance Sheets
- Infant Feeding Charts
- Prenatal and Postnatal Participant Surveys
- Session Tracking Sheets

Between June 1, 2004 and January 21, 2009 the Healthy Baby programs served a total of 14,526 participants. Just under half of participants, or 48.9 per cent, entered the program when they were pregnant and the remaining 51.1 per cent entered the program after the baby was born.

This report provides some brief highlights about participant attendance and program satisfaction between June 1, 2004 and January 21, 2009. The information for this report was drawn from the "We're Glad" forms and the prenatal and postnatal surveys. We review how participants found out about the program, why they attend, how the program is helping them and their satisfaction with the program. The time period covered in this report, unless otherwise noted, is program sessions that occurred between June 1, 2004 and January 21, 2009.

Healthy Baby Programs take place at many different locations throughout Manitoba. Agencies are funded to deliver Healthy Baby Programs but do not use the name "Healthy Baby Program" - each agency and site has its own name and may have specific target groups (for example, there are some "teen sites" offered by some agencies).

Please direct any questions about this report to Cynthia Carr at epiresearch@shaw.ca

SUMMARY OF KEY FINDINGS

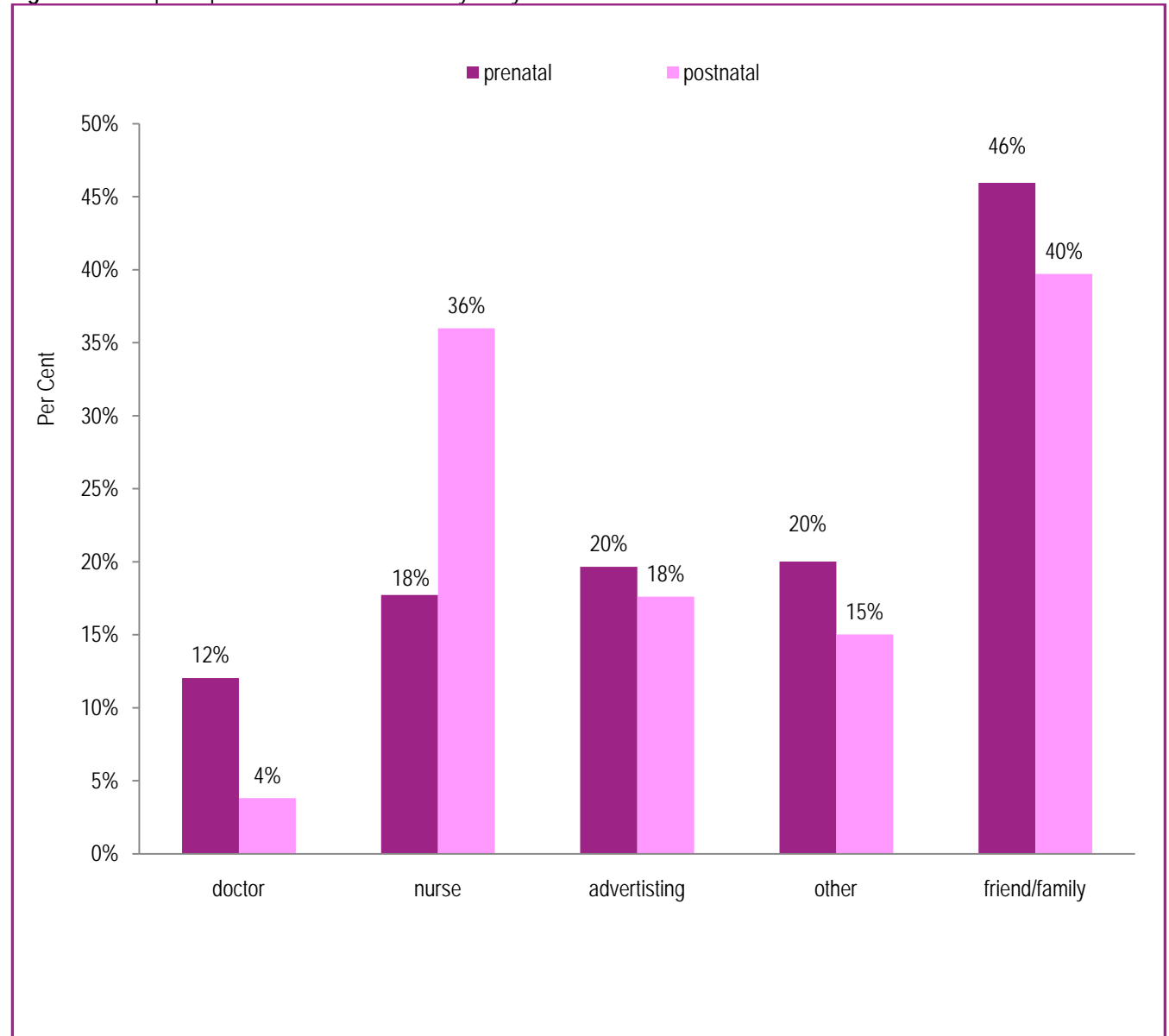
In this report we found that:

- Most participants found out about Healthy Baby programs was through a friend or family member. Participants were least likely to find out about the program through a physician.
- The most common reasons participants attend the program include social reasons such as meeting other mothers, learning how to take care of the baby and to learn more about nutrition for themselves and their babies.
- The most common ways the programs have helped participants are that participants "feel more confident" about taking care of their baby, they have someone to talk to and have met new friends.
- Transportation and "time at which the program was offered" were the two most common reasons that participants found it difficult to attend program sessions.
- Participants tend to be very satisfied with Healthy Baby programming. Program participants were most likely to agree or strongly agree with positive statements related to Program Location, Program Topics and Program Staff. For example:
 - Approximately 88 per cent agreed or strongly agreed that program locations were "accessible".
 - Approximately 87 per cent agreed or strongly agreed that program topics were "easily understood".
 - Approximately 92 per cent agreed or strongly agreed that program staff were "welcoming".
- Much of the work that has been done in other evaluations as well as our own work show some success in the important social, bonding and mental health areas. In addition, most participants report that they enjoy attending programs, make new friendships and feel good about their experiences. These things are all very important but can be challenging to measure. Healthy Child Manitoba Office will build on these findings through a series of Focus Groups and Key Informant Interviews with Healthy Baby Program participants and staff. We are also working towards finding out more about why some women do not attend our programs as well as why some participants leave the program earlier than other participants.

1. How participants learned about Healthy Baby.

- Overall, the most common way participants found out about the program is through a family member or friend (42.3% of all participants found out about the program this way). This is a positive finding in that most family/friends will not recommend attendance at a program that they did not enjoy or find helpful.
- **Figure 1** shows how each type of participant (prenatal and postnatal) found out about the program. Doctors were more likely to provide information to prenatal participants while nurses were more likely to provide the information to postnatal. This may indicate that Public Health Nurses are making referrals to Health Baby Program on post partum home visits.
- Given the introduction of prenatal referrals through the Manitoba Prenatal Benefit, it is anticipated that prenatal program entry will increase.

Figure 1. How participants learned about Healthy Baby.

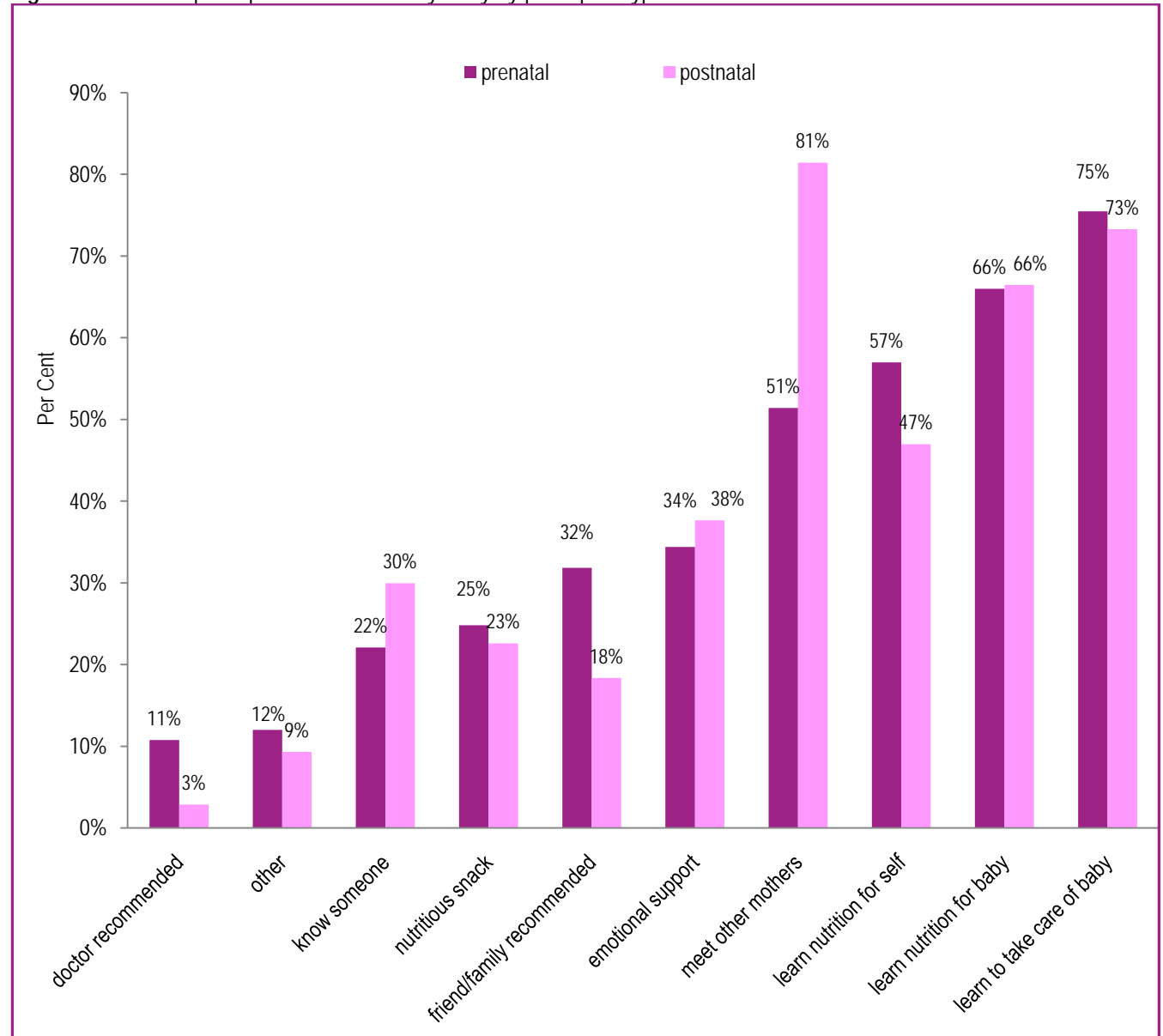


Note: Participants could check as many responses as applied.

2. Reasons participants attend Healthy Baby.

- Approximately 4 out of 5 postnatal participants indicated that the reason they participated in program sessions was to "meet other mothers" while the most common reason for attendance among prenatal participants was "learn to take care of my baby".
- The least common reason for attending Healthy Baby Programs among participants was "doctor recommended it"
- This information comes from our Prenatal and Postnatal Surveys and participants can "check" as many reasons as they like. 98 per cent of survey respondents provided at least one reason.

Figure 2. Reasons participants attend Healthy Baby by participant type.

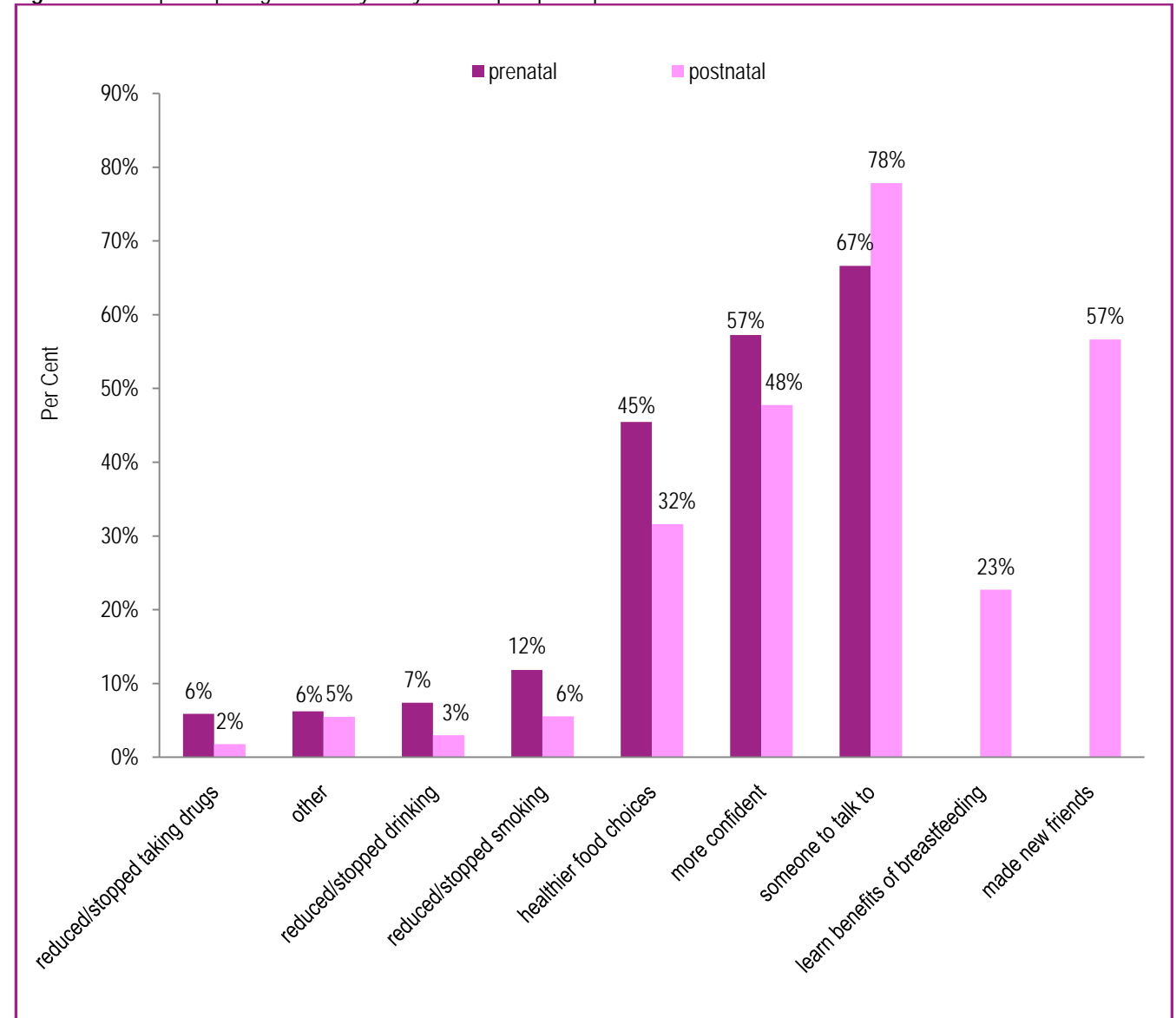


Note: Participants could check as many responses as applied.

3. How participating in Healthy Baby has helped participant.

- The most common area identified for both prenatal and postnatal participants was "someone to talk to" followed by feeling "more confident" in taking care of baby.
- A small number of participants indicated that the program helped them to reduce or stop taking street drugs or drinking alcohol.
- These findings are positive because "social connectedness" and confidence in parenting issues are factors that contribute to healthy outcomes for families.
- Although nutrition is a core component of Healthy Baby Programs, less than half of participants listed "making healthier food choices" as an outcome from attending the program.
- This information comes from our Prenatal and Postnatal Surveys and participants can "check" as many items as they like. 93 per cent of respondents indicated that the program helped them in at least one area.

Figure 3. How participating in Healthy Baby has helped participants.



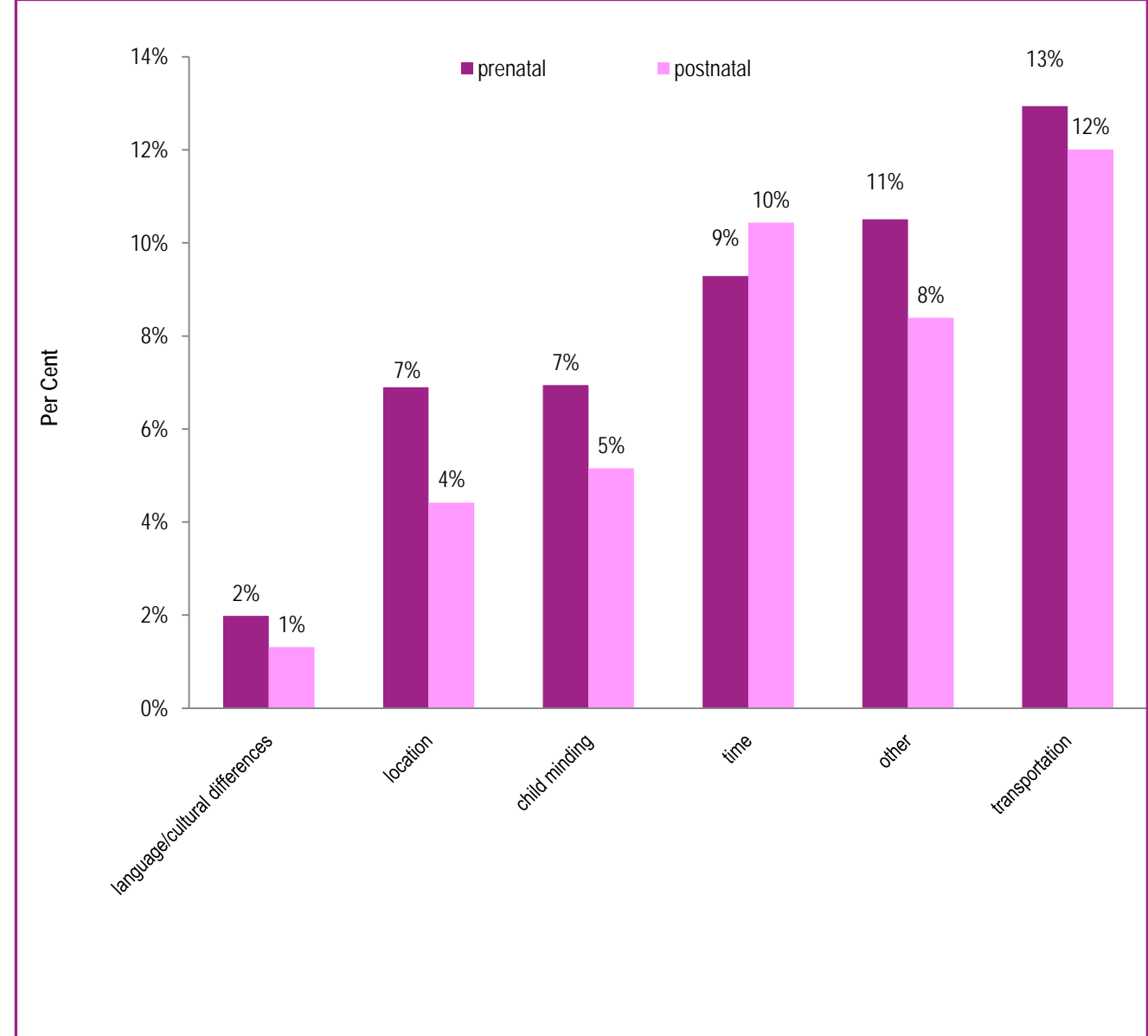
Note: Participants could check as many responses as applied.

Note 2: "learn benefits of breastfeeding" and "made new friends" were not options on prenatal survey.

4. What makes it difficult for participant to attend.

- Approximately two out of three participants cited no difficulties in attending programs.
- For those who did have at least one difficulty, **Figure 4** shows that transportation was the most common difficulty while language and cultural differences were cited less frequently.
- **Figures 5 to 8** show the rankings for some of the difficulties by Agency. When agencies are not listed in each graph, it is because there were no responses from that agency to that particular issue.

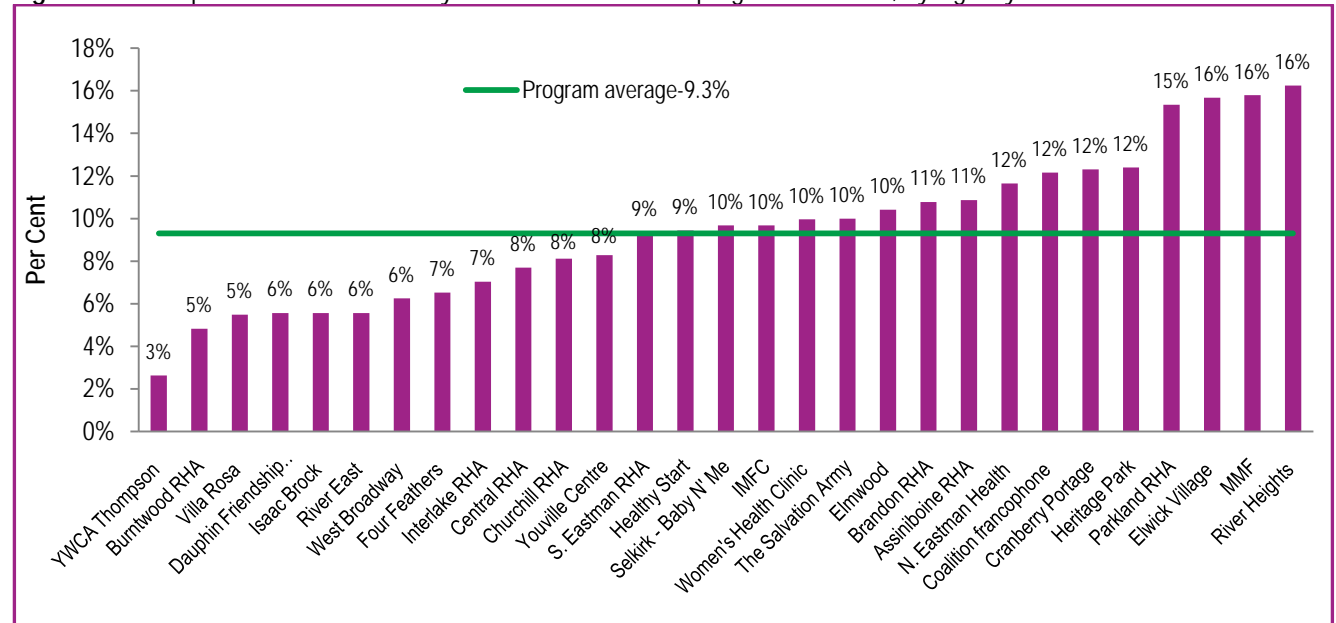
Figure 4. What makes it difficult to attend Healthy Baby Program sessions.



Note: Participants could check as many responses as applied.

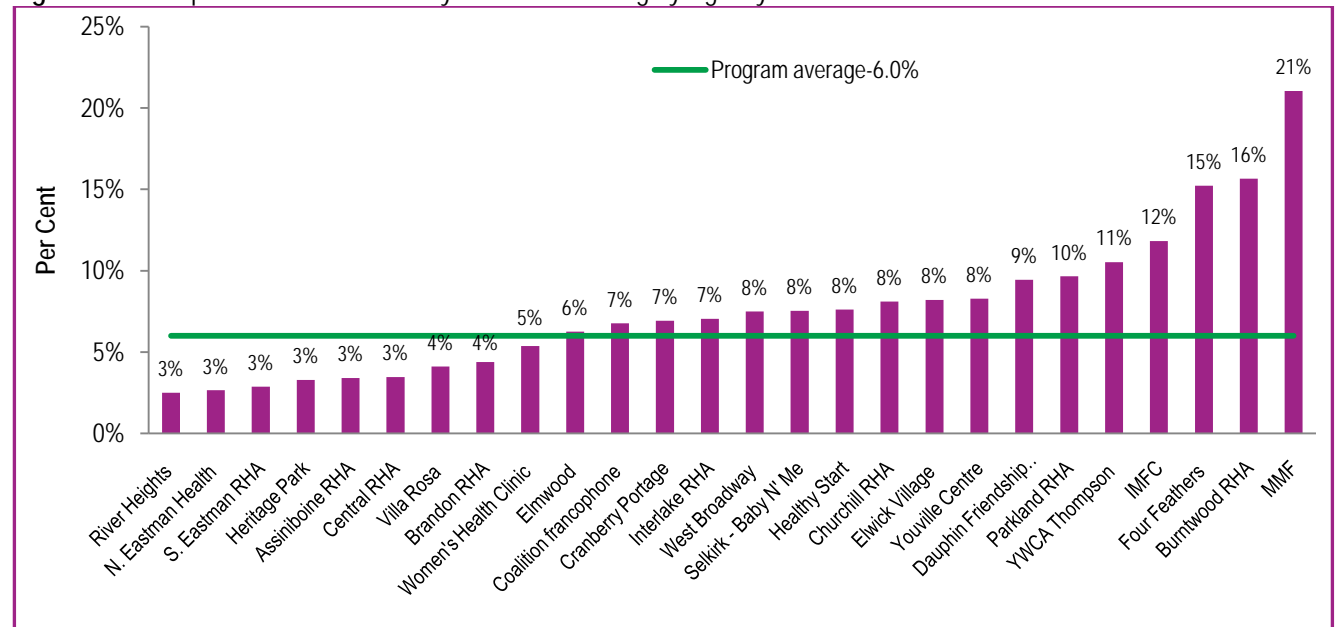
- **Figure 5** shows that between 3 and 16 per cent of program participants find the time at which the program is offered makes it difficult to attend the program. However, it is important to note that this question only includes women who are actually able to attend the program.

Figure 5. Participants who have difficulty with the time at which program is offered, by Agency.



- Participant difficulty with child minding ranges from a low of three per cent of participants in River Heights to a high of 21 per cent of MMF participants (see **Figure 6**). Because child minding is offered at most, if not all, program sites, it will be important to explore further the challenges at sites such as MMF, Burntwood, Fourth Feathers and Indian Métis Friendship Centre. It will be important to identify whether child minding is not offered, if there is insufficient space for the children or if there are other issues with participant satisfaction.

Figure 6. Participants who have difficulty with child minding by Agency.



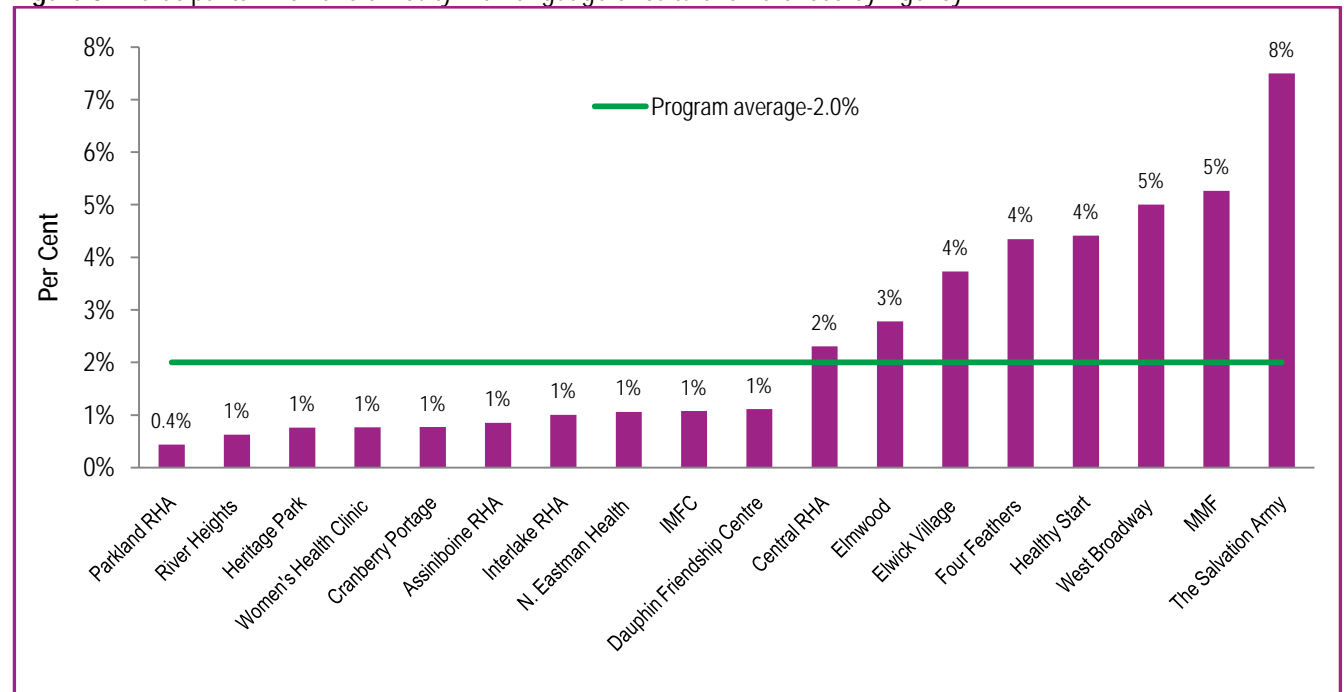
- **Figure 7** shows that between 2 and 12 per cent of program participants indicated that the program location is a difficulty. Assiniboine RHA is the highest at 12 per cent and yet they were on the low end of "transportation difficulty" with only 6 per cent. It would be beneficial to explore further what about the location makes it difficult to attend the program. For example, it may be that participants do have access to vehicles so they can drive to the program but perhaps the site is located in the next community so it is more difficult to attend due to distance.

Figure 7. Participants who have difficulty with program location by Agency.



- Participant difficulty with language and cultural differences was rarely cited at many programs. Responses range from less than 1 per cent of participants in Parkland to eight per cent of Salvation Army participants (see **Figure 8**). Some of our sites, such as the Salvation Army due to focus on providing services to immigrant and refugee families so these results are in line with that target group.
- This information comes from our Prenatal and Postnatal Surveys. Participants can "check" as many items as apply. Just over one in three (36.7%) survey respondents indicated that they had at least one difficulty.

Figure 8. Participants who have difficulty with language or cultural differences by Agency.



5. Participant satisfaction with Healthy Baby Programs.

- The prenatal and postnatal surveys include a series of statements about "program staff", "program environment" and "program topics".
- In each category, participants ranked each specific statement from a low of 1 "strongly disagree" to a high of 5 "strongly agree".
- 96 per cent of survey respondents answered this question. However, each ranking graph will show "data N/A" for those who did not respond to each specific statement.
- Overall average rankings were very similar across broad topic areas as well as between prenatal and postnatal participants (4.3 to 4.4 out of 5).
- The vast majority of participants (approximately 88 per cent) were very satisfied with how the staff delivered the program.
- Over 80 per cent of respondents "strongly agreed" (ranking of 5) that program staff were "Welcoming" and "Supportive".
- Approximately 75 per cent of participants "strongly agreed" that program staff were "focused on us", "attentive" and "knowledgeable". The lowest ranking was for "program staff are organized".

Figure 9. Participant satisfaction with program staff.

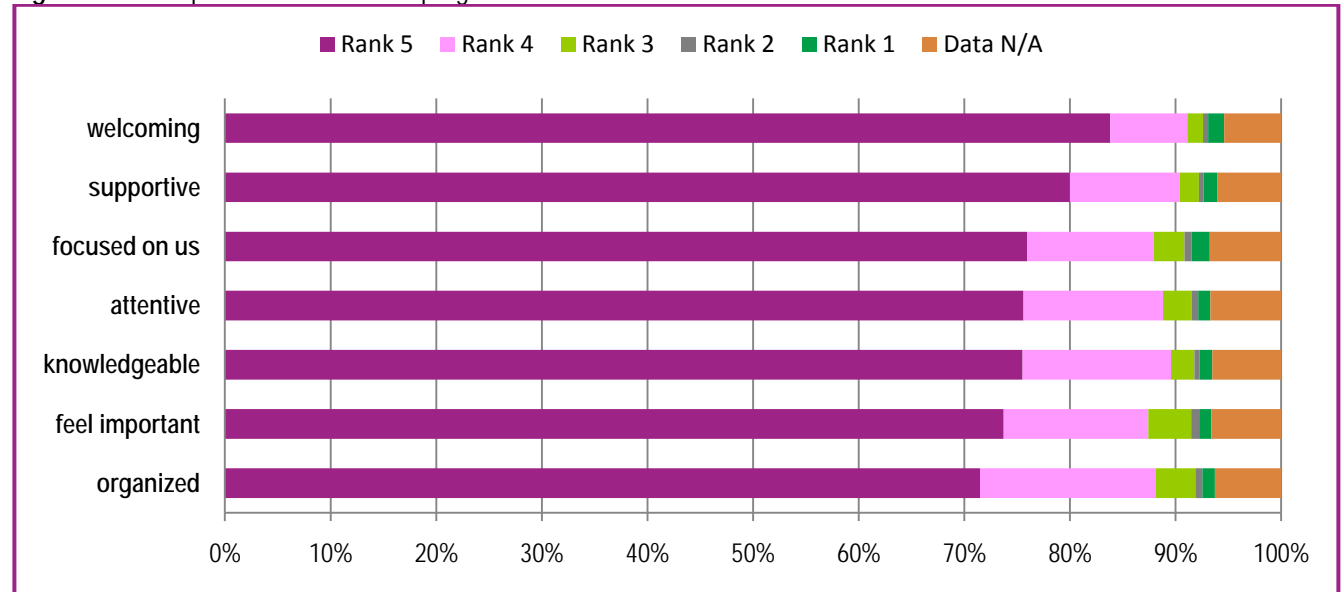
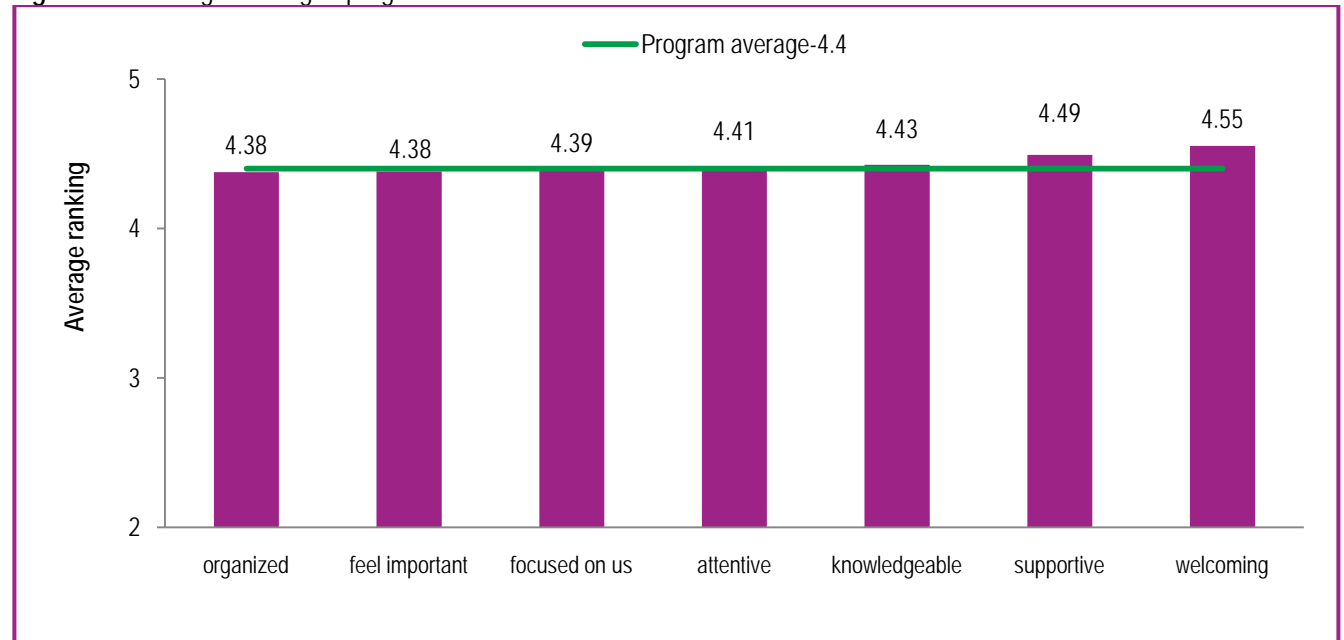


Figure 10. Average ranking of program staff.



- **Figures 11 and 12** show the rankings for the individual statements related to Program Environment.
- The response rate to this question was over 90 per cent.
- A small percentage of participants were affected by interruptions during the session, however, most of the rankings were very positive.
- About 75 per cent of respondents "strongly agreed" that the program environment was "Accessible" with an average ranking of 4.39.
- Similar rankings applied to cleanliness and safety of the environment. Participants were less likely to agree that the location provided "few interruptions". However, it is important to note that there can be many reasons for program interruptions such as a child minder coming to find a participant if another child needs them or a supporting staff member arriving at a program to help with programming.

Figure 11. Participant satisfaction with program environment.

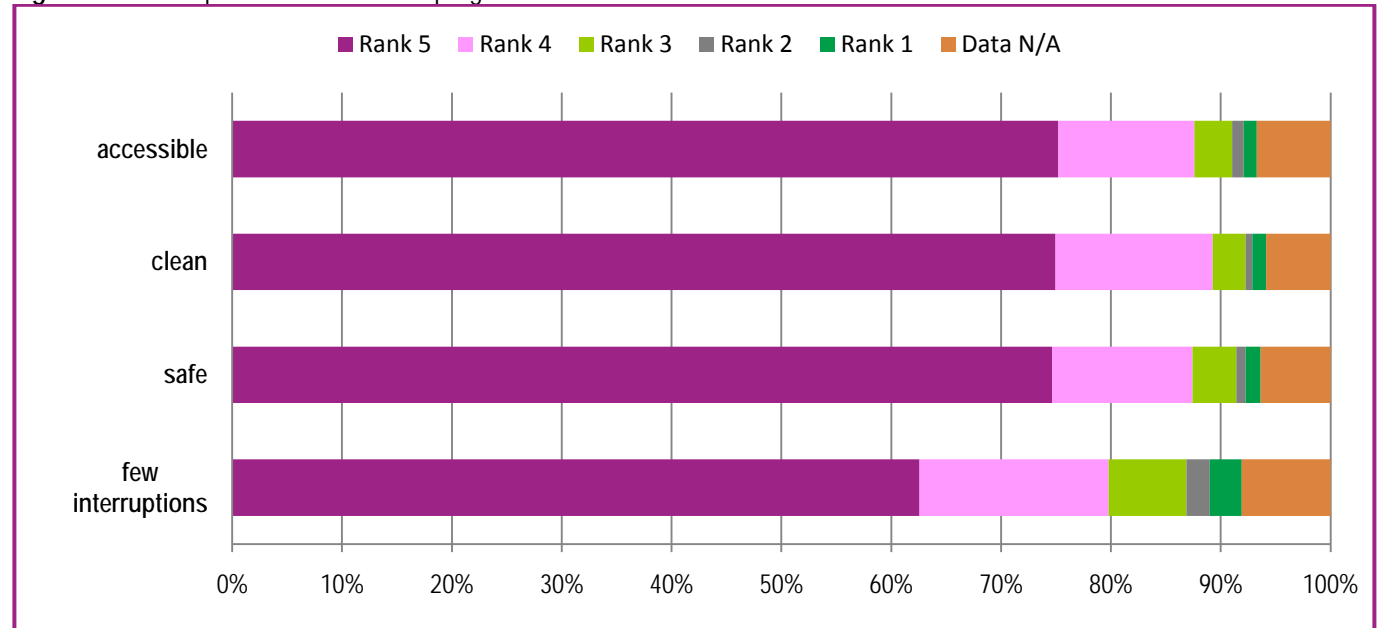
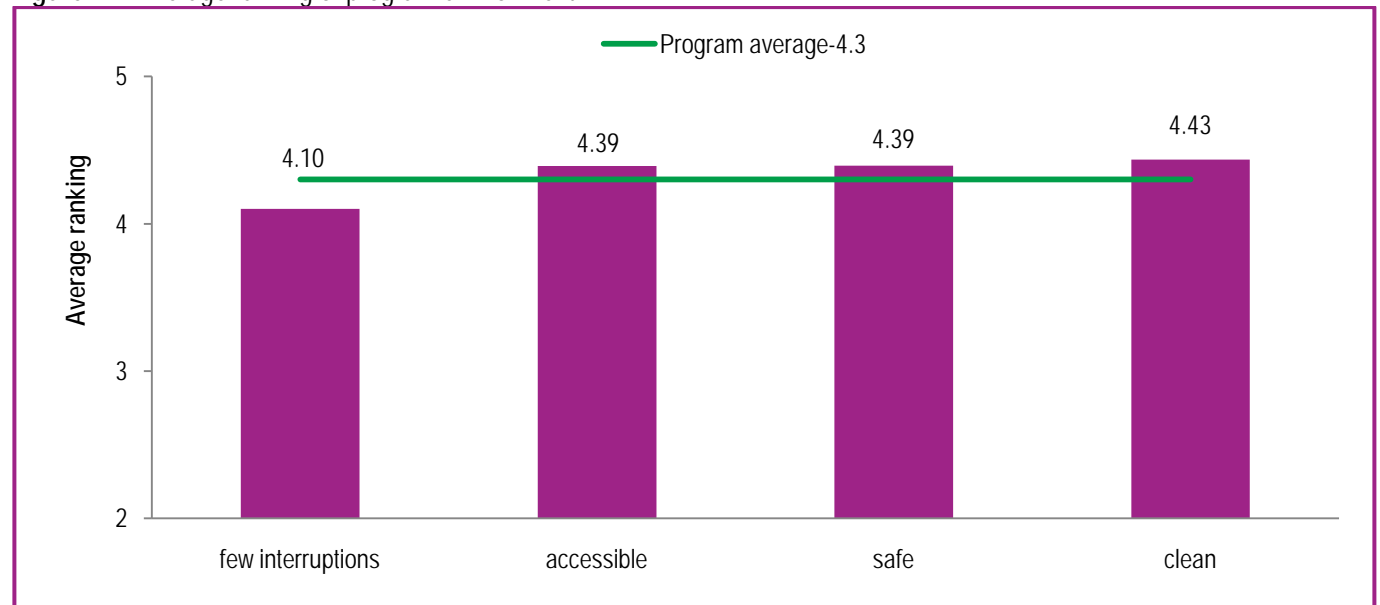


Figure 12. Average ranking of program environment.



- Over 90 per cent of participants who filled in our surveys answered the question about satisfaction with program topics.
- **Figure 13** shows that while just over 73 per cent of participants "strongly agreed" that program topics were easily understood, approximately less than 70 per cent strongly agreed that topics were practical. However, if we combine rankings of "agree" and "strongly agree" (4 and 5), there is very little difference in response to each question. Overall, over 85 per cent of participants find the program topics easy to understand as well as informative, interesting, relevant and practical.
- **Figure 14** shows the overall average ranking of each statement. For example, 73.2 per cent of participants "strongly agreed" that the Program Topics were "Easily Understood" (as shown in **Figure 13**), and the average ranking of this statement was 4.34 (shown in **Figure 14**).

Figure 13. Participant satisfaction with program topics.

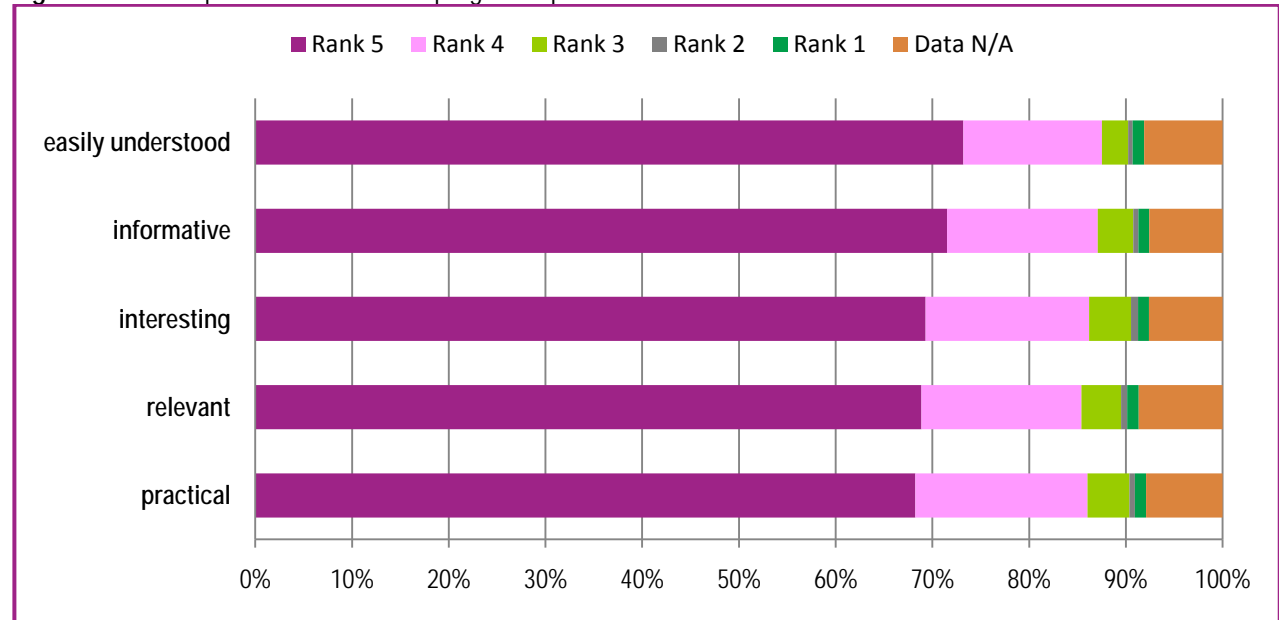


Figure 14. Average ranking of program topics by statement.

