Reaching the “Hard-to-Reach” Families

Investigating Research and Findings in Communities across the Globe

Prepared for CATCH

By Angela Cleveland
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What are “hard-to-reach” families?

The term “hard-to-reach” often describes sections of the community that are difficult to involve in public participation. It is also used to describe those who are overlooked by service providers, as well as people who are resistant to services.

There is a difference between vulnerable families and hard-to-reach families. Vulnerable families are those who are most at risk of adverse outcomes while hard-to-reach families are not necessarily vulnerable but are less likely to engage in services that are aimed at them. These families can range from those unwilling to accept help to those who do not want to ask for help or those who do not know how to use the services being offered.

One of the difficulties with the term “hard-to-reach” is that it infers an overall similarity within distinct groups. It assumes that all the families that fall within this term are coming from similar backgrounds with similar challenges. This homogeneity does not necessarily exist. While some groups may not want to participate, others may be too isolated to have the opportunity and others don’t know the resources exist. Some may feel that the service applies to them, while others may feel too culturally or linguistically diverse.

There is also some concern that the term “hard-to-reach” insinuates blame to families for failing to cooperate with those services being offered. This misconception then shifts the responsibility of further support away from the organizations. To avoid this underlying assumption, other terms for “hard-to-reach” can be used. These may include hidden populations, service resistant, marginalized populations, or under-served. Each of these terms contain their own connotation; therefore, for purposes of this report, the term “hard-to-reach” will be used exclusively. Furthermore, some of the research presented in this paper focuses on reaching out to vulnerable families. While hard-to-reach and vulnerable families are not necessarily the same, the methods used to engage both can often be interchanged.
What is being done to reach “hard-to-reach” families

When determining how to find and engage hard-to-reach families, there are many questions to consider.¹

1. Who are the families that we are trying to serve?
2. What characteristic make these families hard-to-reach?
3. Do these families share similar characteristics or are there various subgroups of families that have different circumstances?
4. What other services exist that already help these groups?
5. How can we collaborate with existing service providers to increase outreach and recruitment?

Finding a successful method to reach out and engage with hard-to-reach families can be difficult. One method by itself most likely will not provide long lasting effects. For long term success, a strategy that is flexible, multi-dimensional and ongoing is necessary.

1. Methodologies for Data Collection

There are two methodologies that are most often used when searching for hard-to-reach families.² The first is called descending methodologies which uses quantitative methods. This method uses a small number of families and provides them with a standardized questionnaire that can be used to make inferences of the whole population.

Another approach is called ascending methodologies which uses qualitative methods. This technique is open-ended and relies on referrals and connections made within a group of people that are loosely connected. The respondent is asked to refer other people who they think may be interested in the services provided. This is also known as the snowball effect.

Identifying the characteristics of hard-to-reach families is another technique that allows a deeper understanding of the circumstances and qualities of those families. A brainstorming technique to
identify these characteristics includes classifying their attributes and providing examples of the following characteristics:

a. Demographics (the quantity and characteristics of the group)
b. Cultural (the way of life of a group of people)
c. Behavioural and Attitudinal (the way the group’s attitude to the resource influences their behaviour)
d. Structural (the way the processes and structures of the resource influence access)

(For the full table, see appendix A)

2. Practical Tips and Techniques

In addition to the various methodologies that can be used to search out hard-to-reach families, there are many practical, on-the-job tips and techniques that can be used. Research, experience, and practical applications can be found throughout the world.

Australia

The Australian Institute of Family Studies, which is government-funded, hosts the Child Family Community Australia (CFCA). Extensive research has been conducted on engaging disadvantaged families. According to their findings, the methods that can be used to reach these families include the following:

- Go to where the families are
- Promote and deliver services in a non-stigmatizing and non-threatening way
- Employ strategies that empower families
- Develop relationships with families, with the community, and with other services

Also in Australia, the Raising Children Network (an Australian parenting website) offers an assortment of resources for parents and caregivers with children from newborn to teenagers. This website provides information that can help parents with the daily decisions of raising children as well as looking after their own needs. In an article that focused on working with families with vulnerabilities, this network recommended the following:

- Be flexible in your communication methods (find a variety of ways for parents to keep in touch)
- Discuss options for communication at the start of the program
- Develop strategies for communicating with non-resistant parents by negotiating with both parents.
- Ensure your service is flexible to the needs of all families.
- Ask parents if they want to help.

**North America**

In North America, the Flamboyan Foundation is a private, family foundation that started in Puerto Rico and is now also in Washington, D.C. They focus on improving educational outcomes for children. As part of their research, this foundation produced a paper that emphasized the importance of engaging with hard-to-reach families.\(^5\) Their findings include the following:

- Personalize the approach to each family or family group.
- Focus on the message and the messenger (market and promote your ideas clearly).
- Get creative (use a variety of methods of communication).
- Watch what and how you communicate (don’t use jargon; be respectful of situations such as financial difficulties).
- Make involvement easy and exciting.

**England**

In England, the Family and Parenting Institute, an independent charity, relies on research and evidence to influence policy and offers practical solutions to make their society more family-friendly. According to their findings, it is important to do the following\(^6\):

- Involve parents (ensuring programs address actual, not perceived needs; reducing the stigma and negative associations of service; building confidence and skills in parents).
- Have the right staff (diverse, flexible and reflects the make-up of the local community).
- Work with other agencies (agency partnerships provide a way to expand professional skills, support and networks).
United Kingdom: Barnardo’s Children’s Centres

In the United Kingdom, an extensive research project was undertaken to discover how people in the field are reaching hard-to-reach families. The Sure Start Children’s Centres are found throughout the UK and are open to all local families with children under the age of 5. They offer stay-and-play sessions, parenting classes, and health clinics. They also provide home visits, group meetings and courses for those in need. The program was introduced by the Labour Government in 1998 and, by 2010, there were over 3500 centres throughout the UK.

Although the program was so expansive, concerns were raised that the programs were not reaching the families that were most in need. In 2010, a comprehensive report was created that analyzed how the successful Barnardo’s Children’s Centres manage to find and engage hard-to-reach families. This report was entitled “Reaching Families in Need: Learning from Practice in Barnardo’s Children’s Centres” (2011).

Who’s at risk?

According to the Barnardos Children’s Centres, the following groups were found to be most at risk:

- Teenage parents
- Lone parents
- Families in poverty and workless households
- Families in temporary accommodations
- Parents with mental health, drug, or alcohol problems
- Families with a parent in prison or engaged in criminal activity
- Families from minority ethnic communities
- Children with disabilities, and parents with disabilities

Others who may be at risk:

- Fathers, especially those with a vulnerable background themselves
- Families affected by domestic abuse
- Isolated parents (including those suffering from depression and those in very rural areas)
- Travellers and other transient families, including recent immigrants
What works?

To understand how to find and engage with hard-to-reach families, the staff at the Barnardo’s Children’s Centres were asked:

“What works when reaching out to vulnerable and disadvantaged children and families?”

The Key Findings:

1. Partnerships with Local Agencies (working together)
   Partnerships with the local agencies emerged as the single most important factor influencing the centres’ ability to reach hard-to-reach families.
   a. Timely information-sharing by partner agencies. This information includes new births, children with disabilities etc...
   b. Referrals for family support and other targeted provision, or for less formal services such as baby-massage or English as a Second Language courses.
   c. Trusted practitioners such as midwives, health visitors and GPs encouraging families to use children’s centre services.
   d. Working together to help families who are reluctant to come in to the centre. For example, visiting vulnerable families in their own home in partnership with health visitors.

2. Learning and Strategy

   Leadership from the centre manager, who views working with the most disadvantaged families as a core goal, was a key element in the centre’s outreach success.

   Challenges for centre managers:
   a. Knowing and responding to community needs (this data needs to be collected and shared between partners)
   b. Actively targeting priority groups
      The children’s centre manager plays an important role in encouraging the staff to find effective ways to engage priority groups and targeting resources to the most disadvantaged.

3. Inclusive Universal Services

   Universal services play an important role in reaching and improving outcomes for vulnerable families. These services include open groups, drop-ins, and various courses. Universal services allow for observation of children and parents thereby enabling referrals to be made for targeted support. These services also help to build the relationship and trust between the parents and the staff.

Universal services are important, but sometimes targeted approaches are needed, even if on a short-term basis. Targeted services are those geared towards a particular group or individual based on any barriers and specific needs that they require. These barriers could include language or cultural difficulties and the needs could include specific issues such as domestic abuse or debt/money management.

5. Outreach and Home Visiting

The term outreach is used to describe a wide range of activities that encourage families to make use of the centres. This term also includes delivering groups and services throughout the community and making home visits for hard-to-reach families. Referrals are made through partnering agencies or through the parents themselves. The families are assigned a project worker who introduces them to the centre and helps them become aware of the services available.

Conclusion: The best way to serve vulnerable families is to work together and communicate the data and information effectively.

In Canada

SIRCH Community Services in Haliburton, Ontario

SIRCH is a non-profit organization based out of Haliburton County in Ontario that develops dozens of community-based programs and has expanded to provide select services internationally.

SIRCH began in 1989 and continues to offer training courses, manuals, kits and games that focus on the strengths and competencies of children, parents, communities, and organizations.

To continue with their quality programs, the organization decided to look into what strategies work best for reaching hard-to-reach families. To gather this information, they interviewed CAPC (Community Action Program for Children) and CPNC (Canada’s Prenatal Nutrition Program) workers to see what has worked for them.

The workers were asked the following questions and gave the following answers:

1. What key tips would you give for engaging a first-time participant so they return?

   - offer a non-threatening environment with minimal paperwork for the parents and a play session for the kids.
• food is an important to include
• address confidentiality, go to where the families are (outreach) and provide transportation when necessary
• offer a buddy system to help newcomers feel more at ease
• offer door prizes and other incentives
• eye-to-eye contact and lots of smiles
• assist in any language barriers that they may be facing
• know and understand cultural norms
• have trained staff (conflict resolution and group facilitation)
• some programs avoid the “coffee talk” to prevent the formation of cliques

2. What is the most effective strategy when reaching hard-to-reach families?

• go to where the families are through mobile programs
• choose locations without a particular bias (ex. Church basements)
• spread the word via word-of-mouth
• go to where the families are (the building, the community spot they hang out, meet them where they are)
• provide food
• host a booth at a local store with brochures and program information along with a draw incentive
• Make use of free community cable channel ad or public service announcements that run for free
• Host an open house
• Focus on language barriers (provide a start-up question in their language and then go from there)
• Find the informal groups
• Rely on professionals (partners) such as Public Health Nurses or others who have the ability to connect through home visits.

3. What are some things you think most effective in keeping them coming back?

• food
• meeting the needs of the parents (listening to them)
• offer parent programs with free childcare
• providing transportation to the programs or activities
• make it fun; give the parents a sense of belonging
• sharing circles
• community kitchens
• offer demonstrations/information sessions
• team synergy within the staff

Note: “Reaching and Engaging Hard to Reach” is one in a series of videos available through SIRCH Community Services. To see other relevant videos and resources, visit their website at www.sirch.on.ca.
BC Children First

Children First Initiatives, which are funded by the Ministry of Children and Family Development, support communities in identifying and developing an integrated early childhood development model for families with children ages 0-6.

They do not deliver a service directly to children but serve as catalysts to change at the community level. They also allocate initiative funds to support priorities identified through community planning.

One of their key objectives is to engage “hard-to-reach” families. Under their “resource” section of their website, they have numerous toolkits including the Community Tool Box. The Community Tool Box is a 46 chapter document (fully accessible online) that provides information on how to promote community health and development by connecting people, ideas, and resources. The chapters are arranged into parts that include “Models for promoting community health and development” and “Analyzing Community Problems and Designing and Adapting Community Interventions.” For a full list of the parts of the Community Tool Box, see appendix B.

In addition, under the section “Using Outreach to Increase Access,” they have created an extensive and creative list that provides suggestions on how to reach hard-to-reach families. There are over forty tips and techniques, including the following:

- “Take advantage of your board of directors and supporters. These people can “talk up” your project in the community and help create an action plan to increase awareness.”
- “Provide info in welcome packets to new residents. Use the existing community “Welcome Wagon” if possible.”
- “Hold off-hour/weekend coffees. Create a low-key gathering by offering informational coffees in towns and neighbourhoods.”
- “Hit the streets, talk with people one-on-one. Go to where people live, congregate and shop to engage them one-one one.”
- “Sponsor local sports activities. Community sports involve many people. Sponsoring advertisements through baseball teams or the local bowling alley will reach many families and youth.”

For the complete list of the forty-two tips, see appendix C.
**Conclusion**

Whether an organization is based out of North America, the United Kingdom, or Australia, the answers to the question “how do we reach hard-to-reach families?” are strikingly similar. Despite differences in geographic location, the five most common ideas that emerged from the organizations, societies, and studies reviewed in this report, were as follows:

1. Work together with other agencies and partners to share information and provide unified support to the families.
2. When trying to reach hard-to-reach families, go to them. This could involve a home visit or posting information in their local grocery store or health clinic.
3. Involve the parents in the programs to a level with which they are comfortable. This gives them a sense of ownership and empowerment and will encourage them to continue with the program.
4. Offer both universal and targeted programs. Both are important when dealing with a wide variety of families and their needs.
5. Offer food.

The next step is to identify what is being done in the Central Okanagan to reach our hard-to-reach families. By identifying what is happening, we can figure out what needs to be done. Working together to create a plan of action will benefit those families, prevent redundancy, and create an efficient and effective method of engagement.

Report prepared by Angela Cleveland
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References


Appendix A:

Tool to identify characteristics of the Hard-to-Reach Families

(from the Swinburne Institute for Social Research in Victoria, Australia (www.sisr.net))

<table>
<thead>
<tr>
<th>Characteristics: Definition</th>
<th>Attributes</th>
<th>Examples</th>
<th>Prompts: What do we know? What do others do?</th>
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<tbody>
<tr>
<td>Demographic: The quantity and characteristics of the group</td>
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Appendix B

BC Children’s First Community Tool Box Table of Contents (Parts A-M)

(For a full list of all the chapter titles, visit their website at: http://ctb.ku.edu/en/tablecontents/index.aspx)

Part A: Models for promoting community health and development: gateways to the tools
Part B: Community Assessment, Agenda Setting, and Choice of Broad Strategies
Part C: Promoting Interest and participation in Initiatives
Part D: Developing a Strategic Plan, Organizational Structure, and Training Systems
Part E: Leadership, Management, and Group Facilitation
Part F: Analyzing Community Problems and Designing and Adapting Community Interventions
Part G: Implementing Promising Community Interventions
Part H: Cultural Competence, Spirituality, and the Arts and community building
Part I: Organizing for Effective Advocacy
Part J: Evaluating Community Programs and Initiatives
Part K: Maintaining quality and rewarding accomplishments
Part L: Generating, managing and sustaining financial resources
Part M: Social marketing and Institutionalization of the Initiative
Appendix C

BC Children First Initiatives: The Community Tool Box
(http://ctb.ku.edu/en/tablecontents/sub_section_tools_1876.aspx#spreading_the_word)

“Spreading the word: 40+ ways to reach people”

1. Use word of mouth. The best source of a referral is someone who was helped and thought the service you offered was good. Encourage your users to "Tell a friend about us." Getting user referrals is a true indication of a program's penetration into a community.

2. Identify and target "gatekeepers" who affect your population's ability to participate. In rural areas or some cultures, for example, fathers are often seen as "gatekeepers " for the entire family. If they say "No," no one in the family will take part. Direct outreach to fathers, mothers, grandparents or teens-whoever you can identify as gatekeeper /decision-makers.

3. Take advantage of your board of directors and supporters. These people can "talk up" your project in the community and help create an action plan to increase awareness.

4. Offer a toll-free telephone number. Especially in rural and/or large service areas, 800-number service increase an individual's ability to call without long-distance phone costs.

5. Distribute or conduct a survey concerning your issue. Surveys provide a vehicle for communication with individuals or households. You can distribute a survey in schools (with permission from the principal or school district), at community events or one-to-one on the street. Keep questions simple and request contact information for follow-up.

6. Use the most appropriate channels for your effort and population:

7. Place inserts in local/regional newspapers. Distribution of inserts/flyers in local papers is cost effective and allows for broad distribution. They reach many people who would not otherwise see your material, in a non-stigmatizing manner. Use the free newspaper if one exists in your community.

8. Place inserts into utility bills. Use the distribution capacity of gas, electric, water or phone companies by having flyers inserted in their bills. This gets the word out to many households in a non-stigmatizing way, and can be low-cost or free.

9. Use commercial mailing services to reach your community. Val-Pak coupon mailings reach thousand of households at a reasonable cost. Company staff often assists with details like layout of your insert.

10. Advertise on milk cartons. This reaches many homes and is a good, local form of advertising.

11. Send information home with report cards or place it in school registration materials. Work with local schools to send flyers home with children’s report cards or other "must see" school communications.
12. Create a display window in prominent areas. Put your information in a window on a well-traveled street, at a popular gathering area, or in a bus depot.
13. Advertise on local billboards. Billboards showing local people and/or phone numbers located in high traffic areas can dramatically increase awareness.
14. Advertise on radio and cable TV stations in your community. If you know your target community, you will know where they seek entertainment and news. Many communities, or ethnic/cultural groups have preferred stations that provide a credible and concentrate venue for you message.
15. Use children's artwork in your promotional material. Children's artwork uses unconventional language and has community appeal.
16. Provide info in welcome packets to new residents. Use the existing community "Welcome Wagon" if possible.
17. Place information on store/ATM receipts. These advertising efforts can be affordable and targeted.
18. Use businesses that distribute products in the community. Get flyers/inserts in supermarket shopping bags or in take-out food containers, such as pizza boxes. These messages reach many people throughout the community in a non-stigmatizing manner, at low cost to you.
19. Advertise in restaurants. Place your program's message on food tray liners or paper placemats at restaurants. This provides a non-tradition context for getting the message to many people in a non-stigmatizing and potentially fun setting.
20. Distribute flyers in back-to-school shopping bags. Take advantage of seasonal or natural activities like back-to-school shopping. (Depending upon the size of the store, this might require approval from central office.)
21. Post flyers with tear sheets everywhere possible around town. Flyers are a mainstay of outreach. Providing tear-off" (tab on the bottom of the sheet that people can tear off and take with them) is most effective. Post flyers everywhere: Laundromats, buts stations, grocery stores, libraries, thrift ships, campground, playgrounds, town halls, and other public places your population gathers or visits.
22. Seek out audiences likely to be eligible for your program. Find those with a high likelihood of being eligible for your service or product due to their participation in other programs, and contact them through mailings, door knocking, or phone calls. These could include self-pay individuals at the emergency room, households using fuel assistance or receiving subsidized child care, employees at large companies with low paying jobs (such as day-care providers and nurses' aides) or those at large companies that offer less-than-full-time jobs with few or no benefits.
23. For groups whose identities must remain confidential and are not directly accessible to you, be creative within necessary limits. With children in a school lunch program, for example, provide the staff overseeing the program with prepared information and ask them to distribute as they see fit.
24. Hold raffles at community events. Raffle off a desirable item as a way to collect names of people interested in getting more information about your service or simply to engage people in discussion. Anyone is eligible to take part in the raffle if they fill out a short questionnaire that asks questions related to your problem and if they want to be contacted with more information.

25. Use a "loss leader." Offer a service, an item or information that will attract people to contact you. Provide non-stigmatizing service (such as preventive health screening) to bring you into contact with people who would otherwise stay away.

26. Participate in national promotional campaigns. Create activities to tie in with the Great American Smokeout, National Alcohol and Drug Addiction Recovery Month, National Breast Cancer Awareness Month, or even Grandparents Day to bring awareness to your program. Many of these campaigns provide materials to help develop community forums, articles, media events, exhibits, banners, and the like.

27. Be creative and interactive at health fairs and community events. These are common places for outreach efforts, but they have mixed results. To increase effectiveness, provide incentives for people to take information, fill out a questionnaire, or complete an application. These may include raffles, small gifts for children or adults, or children's activities. Have unusual attention-getting table displays or have staff wear costumes or eye-catching attire, such as T-shirts saying, "Need free or affordable health care? Talk to me."

28. Staff tables at job/employment fairs. Unlike health or community fairs, job fairs are oriented toward people looking for work. This different focus tends to draw people who may not attend other types of fairs and may be eligible for your program. Job fairs also offer a setting not directly associated with one's neighbors, so those people you engage feel more free to seek information and/or speak with you.

29. Sponsor everyday activities in the community. There are activities or functions that are so commonplace that they are often overlooked, yet they reach many people in your target group. If your effort targets children, for example, sponsor "snow day" announcements on the radio or television during winter months when every parent is listening or watching.

30. Sponsor local sports activities. Community sports involve many people. Sponsoring advertisements through Little League or the local bowling alley will reach many families and youth.

31. Use existing programs for your population to extend your reach. One group in Massachusetts asked local businesses or institutions providing children's programming, such as ballet and karate schools, to put a sticky label on all their registration forms for health insurance. The labels encouraged parents to call for more information about health coverage. Pre-printed labels are easy to supply and a minimal hassle for those agreeing to use them on their materials.

32. Attend immunization days. Do outreach when school children receive their immunizations. Those who come to county health centers and other sites could be eligible for your program.
33. Contact child-care providers. Contact providers with information for the children and families they serve. As with other low-paying, benefit-poor jobs, child-care providers may also need your services for themselves or their children. Ask about their own families once you’ve established contact.

34. Provide information to local police. Local police come in contact with many people who may need services of various types, such as victims of domestic violence.

35. Offer training for doctors and their office staff or schools and their staff. Put together a pleasant experience like a luncheon or coffee for local health care providers or others who work with your population alert them to your program. Don’t overlook office managers, secretaries and others in the organization who might spread the word.

36. Use pharmacists (or other appropriate professionals) as allies. Pharmacists are often on the front line for knowing who has health care needs. Encourage them to post flyers/information on their counters or distribute them to those they serve, and/or set up an information table at a local pharmacy.

37. Provide trainings and information within the court system (including divorce court and victim assistance programs). In the case of health insurance, these avenues can lead you to people who are anticipating a drop in income or losing insurance that was available through their spouse. Juvenile and other types of court proceedings may lead to connections with your target population. Making information available to court clerks is an important link.

38. Outreach to the prison population. Outreach to pre-release inmates in correctional institutions requires special permission, but it can be effective.

39. Hit the streets, talk with people one-on-one. Go to where people live, congregate and shop to engage them one-on-one. Establishing this type of contact is hard, but it works. There is no substitute for being out in the community and meeting people. Good places to go include supermarkets, laundromats, libraries, parks, and community events.

40. Hold off-hour/weekend coffees. Create a low-key gathering by offering informational coffees in towns and neighborhoods. These are best held on weekends or evening, and can be held in town halls, places of worship, or other gathering places. This works well for programs with small budgets and/or large service reaps.

41. Facilitate your process with portable electronics. If you need original documents (birth certificates, pay stubs, etc.) that people are understandably unwilling to give up, use portable scanners, copiers, or digital cameras to capture information during an outreach visit or presentation. Bring a cell phone with you to track down a contact or make an appointment.

42. Work with local agencies-let them know you can help. Many community social service agencies are overwhelmed and understaffed. Contact these allies and let them know how your program can help their clients. Emphasize that you are there to help rather than make more work. Post your flyers at their sites for consumers and staff to see. If you have time, do training for their staff and leave behind informational materials.