



Cornerstones

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Public Awareness and Child Find Activities in Part C Early Intervention Programs

Carl J. Dunst
Patricia W. Clow

Public awareness and child find activities used by state IDEA Part C early intervention programs were examined to determine the extent to which they were evidence-based and therefore effective in terms of locating eligible children. Findings from different research syntheses were used as benchmarks against which the activities were judged evidence-based. Results showed that the largest majority of public awareness and child find activities were not likely to be effective based on available research findings. Implications for improving public awareness and child find practices are described.

Purpose

The first purpose of this practice-based research synthesis is to ascertain the types of public awareness and child find activities used by IDEA Part C early intervention programs to locate eligible or potentially eligible children. The second purpose was to ascertain the extent to which these public awareness and child find activities have characteristics that research indicates are likely to be effective in terms of promoting and sustaining referrals to early intervention programs (Dunst & Gorman, 2006; Faulkner et al., 2003; Grimshaw et al., 2005).

The research synthesis was guided by a characteristics and consequences framework (Dunst, Trivette, & Cutspec, 2002) where the focus was the identification of practices that have features that research indicates were evidence-based. More specifically, we reviewed and integrated information about public awareness and child find activities used by state IDEA Part C early intervention programs with a focus on the extent to which the practices were likely to be effective for intended purposes. This was accomplished by coding the activities according to different kinds of practices and using the codes as estimates of the likelihood of the practices being successful for child find.

Background

Public awareness activities include a mix of methods, materials, and strategies that are designed to inform and motivate people to take action to improve personal welfare (Coffman, 2002). These include multimedia public communications campaigns (Rice & Atkin, 2001) and both social marketing (Andreasen, 1995) and social norms marketing (Linkenbach, Perkins, & DeJong, 2003) initiatives that involve the use of different mediums for delivering public awareness messages (printed materials, billboards, public awareness announcements, etc.) and the methods and strategies used to effectively communicate the message to intended audiences. The mediums for communicating public awareness messages

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es often include public service announcements (PSAs) (Atkin & Schiller, 2002; Tellis, Chandy, & Thaiwanich, 2000), printed materials (Paul & Redman, 1997; Wheelton, 1995), and Web sites (Dahlen, Rasch, & Rosengren, 2003; Kunst, Groot, Latthe, Latthe, & Khan, 2002).

Public awareness activities are often used for child find purposes (Dunst & Trivette, 2004). Child find includes the methods and procedures used by Part C early intervention programs to locate infants and toddlers who are in need of early intervention services. Other child find activities include *outreach* to physicians and other primary referral sources (Berman & Melner, 1992), *screening* programs and events (Wright & Ireton, 1995), population and risk *registries* (Farel, Meyer, Hicken, & Edmonds, 2003), *tracking* programs (Berman, Biro, & Fenichel, 1989), and *collaborations* between primary referral sources and early intervention program providers (Kaplan-Sanoff & Nigro, 1988).

Description of the Practices

Public awareness and child find activities vary on a continuum from those that include passive dissemination of information to those that actively involve recipients in actions affecting changes in their behavior (e.g., parents seeking services for their children). Findings from a number of research syntheses indicate that efforts to influence referral practices are differentially effective along passive to active continuums (Dunst & Gorman, 2006; Faulkner et al., 2003; Grimshaw et al., 2005). The practices examined in these syntheses included information campaigns, referral or practice guidelines, feedback to physicians, outreach to physicians, and organizational interventions designed to better link primary and secondary care providers. Information campaigns included distribution of informational materials (e.g., brochures) or videos to promote referrals to secondary care specialists. Referral or practice guidelines included descriptions of procedures primary care physicians used to make referrals or procedures for implementing targeted interventions. Feedback to physicians included feedback on referral rates and the use of referral feedback forms. Outreach to physicians included specialist or consultant visits to primary care physicians. Organizational interventions included the provision of specialty care in the primary care settings or the attachment of a specialist to a general practice. Findings from a practice-based research synthesis of these interventions (Dunst & Gorman, 2006) found that outreach to physicians and organizational interventions (e.g., attachment of a secondary care provider to a primary care practice) were most effective in influencing referrals and that passive distribution of program materials or guidelines were generally not effective in changing referral patterns. Findings from other research syntheses as well indicate that proactive

interventions are more effective than passive interventions in changing people's help seeking behaviors (Dunst & Hamby, 2006) and increasing referrals to secondary care providers (Clow, Dunst, Trivette, & Hamby, 2005).

The public awareness and child find activities used by states and examined in this research synthesis were compared to findings in previously completed research syntheses to discern the extent to which they could be considered evidence-based. This was accomplished by coding the activities in a number of different ways and constructing profiles of the activities according to type, medium, and other dimensions using research evidence as benchmarks against which the practices were judged as having a probability of being effective. This kind of analysis essentially maps the scope and use of interventions (e.g., public awareness and child find activities) onto evidence-based indicators to ascertain the match or mismatch between the practices and the research (Yin, 2002). The more closely the practices map onto the research evidence, the higher the probability that they can be deemed likely to be effective.

Search Strategy

Identification of the public awareness and child find activities used by states was accomplished by examining the following sources: (1) each state's early intervention program Web site and online policy and procedure manuals and documents, (2) Google and Dogpile searches of each state's early intervention program (e.g., *First Steps*, *Babies Can't Wait*, *Early Steps*), (3) U.S. Department of Education, Office of Special Education Program State Monitoring Reports, (4) *First Signs* Web site (www.first-signs.org) for links to state resources on public awareness and child find, and (5) NICHCY Web site (www.nichcy.org) state links to early intervention, public awareness, and child find. These main sources were supplemented as needed by contacting state personnel and examining material included on other early intervention and child find Web sites. Information was obtained on all 50 states and the District of Columbia.

Search Results

Information obtained in the above searches was compiled in a database and all public awareness and child find activities coded in a number of ways for discerning the extent to which the practices used by states could be considered evidence-based. Public awareness and child find activities were coded according to *type of activity* (electronic, print, Web-based, etc.), *type of intervention* (information campaigns or materials, referral guidelines and procedures, feedback to referral sources, outreach to referral sources, and collaborations with referral

sources), *tailoring* (targeted or nontargeted), *approach* (passive or active), and *emphasis* (degree to which the practice constituted a main focus of state efforts).

Table 1 shows how the public awareness and child find activities were coded. The categorization scheme described by Dunst and Trivette (2004) was used to code the type of activity. The categorization scheme simply provides a way of organizing public awareness and child find activities. The type of intervention was coded based on the categorization scheme used by Dunst and Gorman (2006) for discerning the effectiveness of interventions for promoting referrals from primary care specialists to secondary care providers. The types of interventions are ordered on a continuum from the most passive (information campaigns) to the most proactive (organizational collaborations). Each public awareness and child find activity was coded as either targeted (tailored message) to a specific audience or nontargeted (nontailored message). Tailored messages have been found to be more effective in terms of affecting changes in people's behavior (Dunst & Hamby, 2006). Each activity was also coded as either proactively involved in locating eligible or potentially eligible children or as a passive activity. This code is based on research showing that proactive attempts at influencing change are more effective than interventions that are more passive (Clow et al., 2005). The extent to which the public awareness and child find

activities constituted a main focus of state efforts was coded as either high or low. The focus of this variable was the extent to which currently used activities were likely to be effective when examined in relationship to the other variables. Our main interest was the patterns of use of activities by states and whether the patterns were consistent with research evidence about effective practices (Yin, 2002).

Synthesis Findings

Six hundred and thirty (630) activities were identified by examining the sources of material described above. Table 2 shows the distributions of types of activities used by states and the particular public awareness and child find activities found most often in state descriptions of the activities. Print materials including, but not limited to, program brochures and fliers and screening checklists, made up the largest percent of activities described in state reviewed materials. In contrast, public service announcements and collaborations between early intervention providers and primary referral source providers were described less often.

The coding of the public awareness and child find activities according to the four characteristics constituting the focus of analysis is shown in Table 3. More than half (53%) of the activities involved distribution or the

Table 1
Public Awareness and Child Find Activity Coding Scheme

Variable	Codes	Examples
Type of Activity	Public service announcements Electronic materials Print materials Program child find initiatives Face-to-face referral source contacts Referral source collaborations	Public awareness campaigns, TV/Radio spots Web sites, television productions, videos Brochures, newsletters, developmental checklists Child find committee Screening clinics, presentations to physicians Interagency initiatives
Type of Intervention	Information campaigns Referral guidelines Feedback to referral sources Outreach to referral sources Organizational collaborations	Mass distribution of program brochures Referral forms and manuals Letters sent to referral sources Physician office visits Program staff attached to an NICU
Tailored Messages	Targeted Nontargeted	Brochure written specifically for parents General program brochure
Approach	Active Passive	Program staff interfacing with primary referral sources Billboards, mouse pads, posters
Degree of Emphasis	High Low	State identified priority No emphasis/no longer a focus

Table 2
Types of Public Awareness and Child Find Activities Used by States

Type of Activity	Category Percent	Percent Within Activity Type
<i>Print Materials</i>	29	
Screening materials/checklists		25
Program brochures		22
Marketing materials		14
Program fliers/newsletters		14
Referral forms/feedback forms		10
<i>Electronic Materials</i>	25	
Program Web sites		38
Web-based referral procedures		36
Web-based tracking systems		8
Program videos		6
<i>Face-to-Face Referral Source Contacts</i>	19	
Developmental screenings		56
Outreach to referral sources		38
Health care provider/NICU contacts		3
<i>Program Child Find Initiatives</i>	11	
Training activities		55
Advisory groups/committees		45
<i>Public Service Announcements</i>	8	
Nonspecified activities		62
TV/radio spots		16
Newspaper announcements		14
Billboards/posters		8
<i>Referral Source Collaborations</i>	8	
Small collaborations		45
Targeted programs		36
Large collaborations		19

Table 3
Characteristics of the Public Awareness and Child Find Activities Used by States

Practice Characteristics	Codes	Percent
Type of Intervention	Information materials/campaigns	53
	Feedback to referral sources	2
	Referral guidelines	26
	Outreach to referral sources	10
	Organizational collaborations	9
Tailored Messages	Nontargeted	83
	Targeted	17
Approach	Passive	67
	Active	33
Degree of Emphasis	High	60
	Low	40

availability of different kinds of program materials, more than 80% of the activities were coded as nontargeted, and two thirds of the activities were coded as primarily passive interventions. The majority (60%) of all activities were coded as currently being a major emphasis of state public awareness and child find.

The relationship between interventions found effective and not effective in a previous research synthesis (Dunst & Gorman, 2006) and the coding of public awareness and child find activities in this synthesis is shown in Figure 1. What is shown is the percent of all state activities coded by type of intervention and the effect sizes (percent differences between experimental and control groups) reported in the Dunst and Gorman (2006) research synthesis for the same types of interventions. As can be seen, the activities most often used by states do not map onto research evidence, indicating that there is a low probability of state efforts (as a whole) being effective. What the findings show is that the most frequently used public awareness and child find activities are the kind of interventions that research indicates

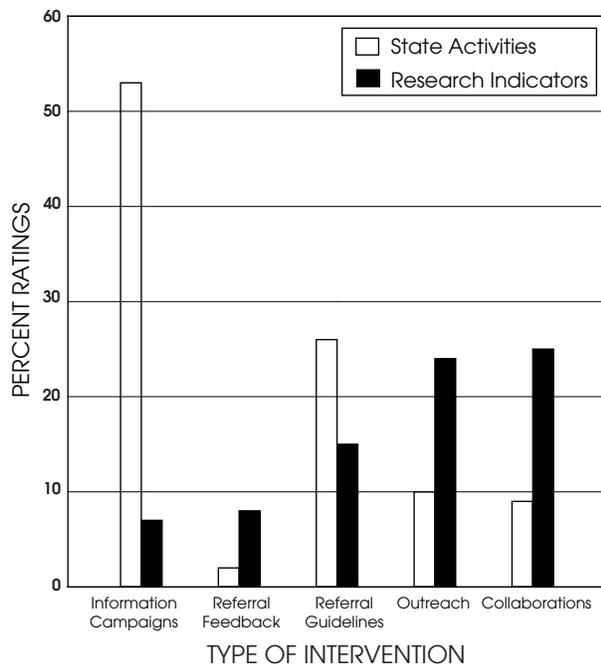


Figure 1. Types of public awareness and child find activities used by states and the effect sizes for the effectiveness of studies using the different practices. NOTE: The research indicators are measures of the relative effectiveness of the five types of intervention (Dunst & Gorman, 2006).

are the least effective. In contrast, the activities used less frequently by states (outreach to primary referral sources and collaborations with primary referral sources) are the practices that research indicates are more likely to be effective.

The extent to which the public awareness and child find activities that were the main focus of state efforts at the time the data for this synthesis were collected is shown in Figure 2 according to type of intervention. Results show that the least effective types of interventions receive more attention than do more effective interventions. Furthermore, the activities that constitute a primary emphasis were more likely to be coded nontargeted (79%) and passive (68%).

Conclusion

Findings reported in this *Cornerstones* indicated that the types and scope of public awareness and child find activities used by state IDEA Part C early intervention programs were not consistent with research evidence on practices found effective for child find purposes (Clow et al., 2005; Dunst & Gorman, 2006; Dunst & Hamby, 2006). The largest percent of activities used by states involved the production and distribution of program materials which are practices that generally have been found

ineffective for either changing people’s help seeking behavior or influencing referrals from primary referral sources. The public awareness and child find activities used by states as a whole therefore are considered non-evidence based.

The one exception to this was the focus on different aspects of referral forms and guidelines that have been found somewhat effective when used in conjunction with some type of face-to-face interactions or explicit instruction on their use (Dunst & Hamby, 2006). Twenty six (26) percent of the public awareness and child find activities were coded as constituting practices effecting referrals (Figure 1) and 71% of these were coded as currently constituting a focus of state efforts (Figure 2).

At least one caveat needs to be mentioned to place the coding, analyses, and findings reported in the *Cornerstones* in proper perspective. It may be the case that some of the activities coded as informational materials were used as part of more active interventions and that they were part of more effective practices. The largest majority of those materials however, were coded as nontargeted (84%) and as passive activities (97%). Close inspection of the particular activities coded as informational materials indicated that most in fact were not things that would typically be part of other interventions.

Implications for Practice

The first implication for practice is that the coding system used in this synthesis can also be used by states

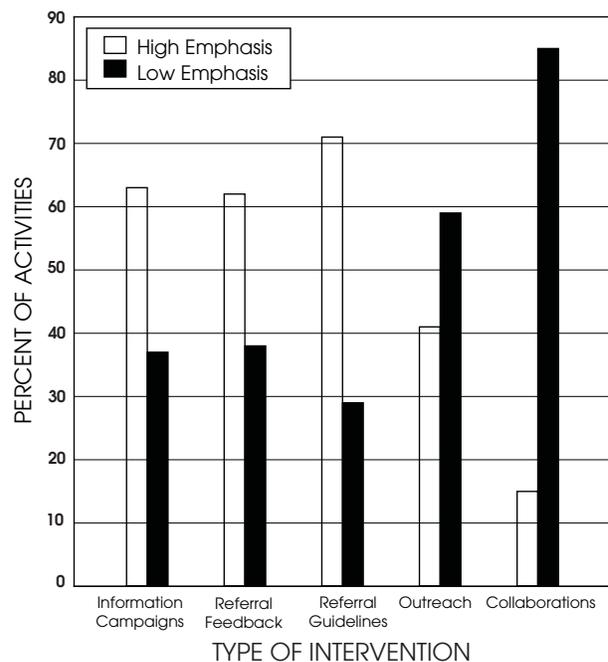


Figure 2. Patterns of state emphasis of the five types of public awareness and child find interventions.

and local programs to assess the extent to which their public awareness and child find activities are likely to be effective. A practice guide is being prepared that can be used for this purpose. It will include both a checklist for discerning the types and scope of public awareness and child find activities and guidelines for targeting changes in efforts to locate eligible children.

A second implication for practice is recognition of the fact that informational materials (in whatever form) are likely to be effective when used in conjunction with some type of direct contact with primary referral sources. Procedures for doing so are described in companion *TRACE* products (Dunst, 2006a).

A third implication for practice is that it is better to concentrate on a few practices that are most likely to be effective than use a lot of nontargeted and nontailored public awareness and child find activities. A lesson learned from work at *TRACE* is that the interventions most effective for changing referral patterns and rates, and for locating children eligible for services, are ones that are highly focused and are implemented repeatedly over time.

A research summary of this *Cornerstones* includes guidelines that can be used to improve public awareness and child find. When used in conjunction with other *TRACE* practice guides and guidelines, they can be part of a comprehensive approach to child find (Dunst, 2006a, 2006b, 2006c). The interested reader is referred to the *TRACE* Web site (www.tracecenter.org) for descriptions of other child find practices.

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Authors

Carl J. Dunst, Ph.D., is Co-Principal Investigator at Tracking, Referral, and Assessment Center for Excellence and Co-Director of the Orelena Hawks Puckett Institute, Asheville, North Carolina (dunst@puckett.org). Patricia W. Clow, M.P.H., R.D., is a Research Associate at the Puckett Institute (pclow@puckett.org).