

# The Baby TALK Research Series

Applied research to inform practice using the Baby TALK model

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# Participant data in the Baby TALK Demonstration program

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This fact sheet provides an overview of participant characteristics in the Baby TALK Demonstration program located in Decatur, Illinois. In brief, the statistics demonstrate early identification of a high-risk population of mothers using the Baby TALK model.

# **Characteristics of Baby TALK Mothers**

## Education Level (n=5,370)

- 19.1% of Baby TALK mothers had less than a high school or GED diploma
- 36.2% of Baby TALK mothers had a high school diploma or GED degree
- 28.5% of Baby TALK mothers had an Associates or vocational degree
- 16.3% of Baby TALK mothers had a Bachelor's degree or above These figures illustrate a significant percentage of mothers with relatively low levels of education with 55.3% of moms having a high school education or less.

## Employment Status (n=4,903)

- 50.8% of Baby TALK mother were employed at the time of identification
- 42.2% said they were unemployed at the time of identification
- The remaining percentages reported student or self-employed status These figures illustrate a significant percentage of mothers who are unemployed, related to low-income levels.

## Marital Status (n=5,100)

- 42.4% of Baby TALK mothers identified as married.
- 53.1% identified as single parents
- 4.5% reported being either divorced, separated, or widowed

These figures illustrate a significant percentage of single mothers identified with the model.

## Income Level (n=2,960)

- 34.1% of Baby TALK mothers made less than \$10,000 annually
- 24.6% made between \$10,000 and 30,000 annually
- 17.2 % made between \$30,000 and \$49,000 annually
- 24.1% made \$50,000 or above.

These figures suggest the Baby TALK model is able to identify is serving a wide range of participants with varying degree of needs. For example, the Baby TALK model identified families both low-income and high-income earners in need of early childhood services Note: The sample size for income level is low due to fewer reports on income status at intake.

# First Encounter through the Baby TALK model

Our analysis looked at the location where mothers were first identified using the Baby TALK model. The top three Decatur locations were:

- 1) Hospital settings
- 2) A local social service settings for low-income mothers
- 3) A community health clinic
- An astonishing 56% of mothers (2,419 mothers) were identified at Decatur Memorial Hospital and St. Mary's hospital combined
- 22% (937 mothers) were located at the Women, Infant, and Children (WIC) social service office.
- An additional 10% (424 mothers) were identified at the Community Health Improvement Center (CHIC) Decatur office.

# Characteristics of Young Baby TALK Mothers

## Young Mothers under the age of 20 (n=234)

- 72% of young mothers had less than a high school diploma.
- 51.9% of young moms lived with extended family while 17.6% lived in single-parent homes. Only 9.9% lived in a two-parent household
- 82.7% of young mothers made less than \$10,000 annually
- 44.2% of young moms reported being unemployed at the time of identification. Only 12.1% said they were employed and the remaining percentages reported student status.
- 56.7% of young moms identified as Black, 34.8% identified as White, 2.3% identified as Hispanic and 3.2% reported Other

# First Encounter through the Baby TALK model

Young mothers under the age of 20 years were first encountered in the following top five Decatur locations:

- 1) Hospital settings
- 2) A local WIC social service office
- 3) A community health clinic
- 4) High school and alternative high school programs
- 5) Local public libraries
- 29% (168 young moms) were identified at Decatur Memorial Hospital and St. Mary's hospital combined
- 30% (170 young moms) were identified at the WIC office
- 13% (76 young mom) were identified at the CHIC office
- 11% (65 young moms) were identified at local high schools and alternative high schools
- 7% (40 young moms) were identified in public libraries

#### Administration

Claudia Quigg, M.Ed. Founding Executive Director

#### Authors

**Christine Leow, Ph.D.** is a Senior Research Associate at Branch Associates, Inc. and serves as the quantitative methodologist for Baby TALK. Inc. She has a Ph.D in Policy Research, Evaluation and Measurement and is also trained as a school psychologist with an M.Ed and Ed.S degree. Her research interests focus on addressing selection bias, using rigorous evidence-based research to inform policy, and specializes in program evaluation within early childhood education settings.

Aimee Hilado, Ph.D., LCSW leads the research initiatives for Baby TALK, Inc. Additionally, Dr. Hilado is a licensed clinical social worker and instructor at Loyola University Chicago, School of Social Work. She has a Ph.D. in Social Work and an M.S. in Applied Child Development, with a specialization in infant and toddler development. Her research interests include child welfare, early childhood mental health, program evaluation, and clinical practice with new immigrant populations.

# The Baby TALK Research Collaboration

In January 2010, the Baby TALK Research Collaboration was established to support the organization's mission – to positively impact child development and nurture healthy parentchild relationships during the critical early years – through applied research. The Research Collaboration houses a broad range of evidence-based materials relevant to the Baby TALK model. Research efforts focus on the implementation of the Baby TALK model in various communities, the participants identified and recruited using the model, and specific programs that serve high-risk families with young children. The Collaboration also houses research on child and family outcomes tied to the Baby TALK model, and serves as an informational hub for those interested in relational models for serving vulnerable families.



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