A Community Capitals Framework for Identifying Rural Adaptation in Maternal-child Home Visiting

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OBJECTIVE: To understand how maternal and child home-visiting programs are adapted, enhanced, and expanded to meet the unique needs of rural communities. DESIGN: We explored factors shaping the role of home visiting with data from a 2013-2015 statewide evaluation of Maternal, Infant, and Early Childhood Home Visiting-funded programs. Features unique to a rural experiences were mapped onto the Community Capitals Framework. SETTING: Individual, semistructured interviews were conducted at 11 of 38 home-visiting sites across Pennsylvania. PARTICIPANTS: Program administrators, home visitors, and clients. MAIN OUTCOME MEASURE: Program adaptation. RESULTS: Our analysis represents 150 interviews with 11 program sites serving 14 counties. We document how rural home-visiting programs address community-wide limitations to maternal and child health by adapting program content to better meet the needs of families in rural areas. Data demonstrate how rural home-visiting program's provision of economic and social services reach beyond maternal child health care, building the capacity of individual families and the broader community. CONCLUSIONS: Home-visiting programs should be viewed as a vehicle for improving community well-being beyond health outcomes. These programs have become an integral part of our public health framework and should be leveraged as such.

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