

# Home Visiting Challenges and Opportunities: Key Issues in Improving Reach, Quality, and Impacts



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## WHY FOCUS ON EMERGING ISSUES?

HARC has consistently served an important role in translating emerging issues into learning opportunities. We have done this by clarifying how policy and community issues impact front line practice; promoting and implementing studies to unpack these topics; investigating promising solutions to address key challenges; and disseminating new learning to the field. In HARC's 2022 reauthorization, HRSA included a specific program objective requesting that we identify practice and contextual issues of high interest to the field and disseminate promising strategies to address them.

Over the coming years, we will use three main methods to continue the identification and exploration of emerging practice and policy concerns.

- Conduct regular surveys and outreach to key stakeholders and HARC members to solicit their perceptions of emerging issues;
- Partner with researchers, national home visiting models, and state MIECHV leads to expand research opportunities to dive deeper into emerging practice issues and policy opportunities, offering actionable ideas to improve program implementation and family outcomes; and
- Synthesize and disseminate new research ideas and funding opportunities through a variety of communication methods including briefs, webinars, podcasts, newsletters, and special topic meetings.

## Our Initial Outreach to Partners

Since HARC's reauthorization, we have conducted six focus groups with several key partners including members of the National Alliance of Home Visiting Models; the National Home Visiting Network; the National Child Abuse Coalition; the Association of State and Tribal Home Visiting Initiatives (ASTHVI); parent representatives; members of the MIECHV Technical Assistance group; and federal project officers and staff. While the specific questions we raised in each group varied depending upon the group's expertise, all of our sessions explored issues most salient to respondents in three domains:

- **Practice** - issues related to what home visitors do, their relationships with families, and their anticipated impacts;
- **Policy** - State or Federal public policies or administrative guidelines that exert influence on home visiting programs and the context in which they operate; and
- **Operational issues** - staffing, funding and other factors that impact quality program management.

We also solicited input from HARC members on these topics through surveys and presentations at HARC meetings as well as ongoing conversations with members of the HARC Leadership Team and National Advisory Council.

In the course of all this work, we asked respondents to identify both the **challenges** and **opportunities** they believe home visiting programs face in increasing the proportion of expectant and new parents who know about and receive quality early home visiting services.

**A word about “emerging issues”:**

*Like all interventions, establishing, delivering, and sustaining home visiting programs is hard work and fraught with challenges. Going forward, HARC’s focus will be elevating a subset of these issues that not only challenge current assumptions and practices but also require new thinking or new structures to effectively address them. These “emerging” issues are likely to reflect current conditions that could not have been predicted as well as long standing implementation issues that have grown increasingly complex, have proven resistant to traditional problem-solving techniques, and beg for new thinking or innovations to tame them.*

## What We are Learning

Early home visiting programs lie at the nexus of multiple service delivery systems and public policy issues. Program outcomes incorporate several domains including, among others, maternal and child physical and mental health, parental knowledge and capacity, economic well-being, and child and family safety. In addition to working directly with families, home visitors play a key role in connecting families to a range of additional basic needs and therapeutic services, resources that may or may not be available due to local policies and investment patterns. As such, the factors influencing the implementation and delivery of home visiting are not unique to this field but rather often reflect issues that challenge other human service providers and social service systems. However, home visiting’s primary audience (pregnant people and new parents with young children) and its prevention and health promotion focus come with unique challenges and sensitivities in framing how these services are presented to potential recipients and how recipients view such offers of assistance. Given this unique context, focus group respondents and HARC members identified a number of issues central to improving both the reach and impacts of early home visiting.

**Most of the concerns respondents mentioned are not “emerging” issues but rather long-term challenges:**

Focus group participants raised a number of long standing or “enduring” issues surrounding home visiting program delivery and sustainability. Many of them are more acute today due to COVID’s impact on the daily lives and routines of families but rarely challenge the fundamental purpose of early home visiting; they reflect issues of degree not kind. That said, these issues often create significant complications in doing the work, ensuring program quality, and improving program effectiveness. These ongoing challenges include:

- Adequate, appropriate, and timely **on-boarding and professional development training** for home visitors;
- The application of **reflective supervision techniques** for both home visitors as well as supervisors to improve program quality and staff capacity;
- **Participant engagement rates** both in terms of initial program engagement as well as retention rates;
- Identifying effective ways to establish, strengthen and sustain **provider-participant relationships** in home visiting;
- **Accommodating program content** to fit specific subpopulation and community needs;
- **Improving collaboration and coordination** across agencies serving young children and their families;
- Ensuring **access to effective clinical or remedial services** to address participant mental health, domestic violence, substance abuse, and physical and cognitive disabilities; and
- Understanding the **impact MIECHV guidelines** and benchmarks can have on program performance and the ability of programs to respond to local concerns.

All of these are important research topics and factors that contribute to program quality. Continuing to address them by critically examining local, model, and state implementation systems and Federal guidelines will be key to improving practice. HARC's Precision Home Visiting Paradigm offers an important tool for the research and practice communities in examining these issues and better understanding their differential effects on specific populations and communities. See <https://hvresearch.org/precision-paradigm/>.

Equally important will be considering how the scope and potential responses to these challenges have been and are being influenced by broader trends in the programmatic and policy context. Focus group respondents as well as HARC members have identified six overarching trends, or emerging issues that are reshaping how home visiting programs are structured, how they are staffed, and how they are viewed by potential program participants and policy makers. We have listed these issues according to the frequency they were raised across all respondent groups.

**Emerging Issue #1: Applying an equity lens in examining the challenges facing the field is essential.**

Virtually every focus group referenced the need to examine the role that implicit and explicit bias play in shaping home visiting practice and the context in which programs operate. While prior research has shown how provider bias can impact the health care a person receives, we know little about how unequal or biased treatment from a home visitor impacts program outcomes. Similarly, we have little to no information on how allocation of home visiting resources has impacted historical inequities in the availability and quality of the health, economic, and social services offered to new parents across all communities and populations. A recent ChildTrends report (Lin, 2023) on a data-driven approach to improve the equity of emerging preschool initiatives suggests that data is needed across multiple service delivery domains including supply, outreach, enrollment, learning experiences, transitions, and administration to achieve equity. Disaggregating outcomes by race can reveal differential impacts but does not tell us whether and how experiences of home visiting vary for different subgroups. Elevating our consciousness on racial disparities and differential treatment based on participant characteristics and resources is a cross-cutting issue for HARC and for the field.

**Emerging Issue #2: Hiring and retaining staff to deliver and manage home visiting services is the most frequently cited barrier to sustaining and growing program capacity.**

Workforce development and capacity has long been referenced as a major implementation challenge in home visiting. Over the past two years, however, staffing shortages have become more acute across all employment categories including front line workers, supervisors, local program managers, and state home visiting personnel. Whereas home visiting has always had a workforce issue, these issues are now being played out in a rapidly changing labor market. Workers in all professions - particularly those in the "helping" professions - have new expectations regarding what is an acceptable work-life balance. Direct service providers are re-evaluating how much stress they want to absorb and how much they want to be "on call" for their clients. Competitive salaries are important but may well be insufficient to attract new staff and retain current home visitors. And significantly raising salaries with stable or only modest increases in funding for EBHV programs has implications on service capacity. Workforce challenges are cited by virtually every stakeholder group as the key issue in expanding service availability. Specific concerns raised by respondents under this heading include, among other things, worker qualifications (both education/training and lived experience), pay, career advancement, and identifying and addressing potential implicit bias within the workforce.

### **Emerging Issue #3: Post-pandemic, the centrality of “home” in home visiting is less clear as models move toward hybrid models.**

Most home visiting models are moving toward a “hybrid model” in which some provider-participant interactions are virtual. The expanded use of virtual service delivery emerged in response to the implementation challenges COVID imposed on home-based, face-to-face service contact. While initially a response to this significant contextual challenge, the strategy proved useful in a number of areas including providing families greater “agency” in framing the service contact; reducing costs and improving staff efficiencies; and extending program reach to communities and populations that had been historically underserved by home based service delivery (Hadley et al., 2023). In at least one study, shifting service delivery to a fully virtual format produced outcomes comparable to those achieved through home-based service delivery (Schein et al., 2023). On the other hand, virtual service delivery has complicated the ability of home visitors to accurately administer a range of screening and assessment tools or to fully assess parental capacity and child safety (Chazan-Cohen et al., 2021; LeCroy & Milligan Associates, 2022). We know little about what mode of delivery works best for a given family (e.g., hybrid vs fully in person), or how to guide decision making incorporating both evidence and family preferences. Understanding how this new hybrid structure of “home visiting” will shape overall program implementation and, more importantly, program impacts is of high concern to those charged with developing and managing early home visiting programs.

### **Emerging Issue #4: Today’s policy and community context provides new opportunities, as well as challenges, in delivering home visiting services.**

Home visiting programs, like parents, are influenced by the normative and policy contexts in which they operate. Today, these contexts are unpredictable and, in some instances, unfavorable to giving parents (and programs) access to key resources. Focus group participants cited political volatility with respect to health care access and immigration policy as well as wide variation in levels of public investment in a range of basic needs and social supports as issues that are shaping what home visitors can expect to offer program participants going forward. Participants also noted that home visitors express a growing safety concern related to rising levels of random community violence and the presence of firearms in the homes they visit. Setting aside how policies and resources impact service availability or personal safety is important. A recent report from the National Scientific Council on the Developing Child (2023) underscores the powerful effects that natural and built environments have on the early foundations of health and development, suggesting that a “more intentional early childhood perspective within the current concerns of urban planning, rural development, environmental protection, climate change, and anti-discrimination policies, among others” (p. 2) is necessary. Improving child and family outcomes will require understanding the impacts of these external forces on participant needs, child health and developmental risks, and availability of mediating and supportive resources.

### **Emerging Issue #5: Conducting “high impact” research calls for new innovations in how studies are framed, data are collected, and different perspectives are valued.**

The Precision Paradigm offers a useful framework for advancing the ability to learn what aspects of home visiting work best, for whom, and under what circumstances (Duggan et al., 2022; Supplee & Duggan, 2019). It offers a useful tool to advance the types of information used to guide policy and investment decisions beyond information drawn solely from randomized control studies of highly specified models. However, *how* to build a more inclusive and equitable set of research designs, assessment tools, and analytic methods that meet rigorous standards is unclear. Focus group participants referenced the need for the field to be more thoughtful and intentional about selecting research designs, measures, and analytic methods that are inclusive and equitable. Many discussed the need to do a better job engaging community – meaning home visiting participants, service providers, and other interested groups - in the design, implementation, interpretation, and dissemination of research. Yet, more work

is needed to understand how to engage community authentically and in ways that incorporate and honor diverse perspectives and lead to improved outcomes. Moreover, the field is struggling with how to incorporate and honor different perspectives and ways of learning and knowing in a context in which evidentiary standards and hierarchies place higher value on certain research designs over others.

While most agree that incorporating the voice and perspectives of program participants, service providers, and community leaders in both how research is designed and findings are applied is essential to generating high impact research, differences exist in how best to secure, prioritize, and generalize diverse input. More inclusive research designs may well find that what parents want from home visiting programs and the outcomes they value differ from the values and expectations policy makers establish when investing in certain programs. A parent's notion of a successful program encounter may not mirror what has been considered as the scientific definition of "success" (e.g., progress on a well-established measure or progress against a commonly accepted benchmark). How best to generalize findings secured in diverse ways from diverse methods under a common, shared rubric of what "evidence-based" means remains a subject of debate.

**Emerging Issue #6: Investments in a combination of universal and targeted home visiting models may help reduce stigma and improve reach, engagement, and overall impacts of home visiting.**

Home visiting has been largely defined through MIECHV as the provision of intensive services to families living in under resourced communities. While the recommended duration for the most common home visiting models range from a few months to several years, these programs involve multiple visits to families who demonstrate some number of socio-economic or behavioral challenges. An alternative view has long existed, at least in the child abuse prevention field, that all parents, regardless of their personal situation, face challenges in caring for their infant or young child and therefore should be offered the opportunity to articulate their concerns and be referred on to resources that might help them meet these obligations or reduce their stress (Daro, 2019). Some communities offer universal assistance through comprehensive assessments and referral systems delivered through primary health care services, community-based information and referrals systems, and home visits delivered to all new parents in specific geographic areas (Dodge, 2022). In combination, universal and more focused home visiting programs create a pathway to dramatically expand the reach, efficiency, and impact of early home visiting. Intensive home visiting models may expand but will always have limited capacity based on their costs. In addition, renewed concerns over the stigma associated with offering assistance only to those with certain socio-economic characteristics or behavioral challenges underscore the need to build a comprehensive, equitable parent support system that recognizes the universal challenges associated with parenting and the systemic forces that have left many families woefully under supported and marginalized.

## **Our Next Steps**

Over the coming months, the HARC Leadership Team will continue to solicit input from our partners and members as to how these emerging issues are impacting program design, reach, quality, and effectiveness. We are particularly interested in identifying partners examining and defining in greater detail one or more of these issues. While we believe programs and program participants will benefit from a deeper understanding of all these issues, HARC recognizes that strategic decisions will be needed as to how we allocate our limited resources to maximize impact on these concerns.

Building on HARC's strengths as a research-practice partnership and our commitment to promoting rigorous, high impact research, our initial emphasis will be on the following tasks:

- Solicit input from HARC members on their current work regarding both the enduring and emerging issues and how HARC can facilitate communication and learning among members sharing similar interests;
- Identify the ways in which HARC's past work and current objectives can contribute to advancing our understanding of these issues and their intersection;
- Work with other HARC partners to identify the ways in which these issues have been reflected in the current literature and the relative emphasis each partner is placing on these issues in formulating their own action agendas;
- Launch a series of conversations among HARC members on how these emerging issues are being defined and framed and how these framings impact research questions and potential solutions; and
- Continue to share our learnings with the HARC membership and the broader home visiting field through newsletters, presentations at public meetings, and other means.

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