Introduction

Home visitors often confront sensitive topics, such as maternal depression, substance use, and intimate partner violence, in their daily work with families. These stressors can harm children’s health and well-being and limit parents’ ability to provide needed care. They also place increased demands on home visitors, contributing to stress, turnover, and burnout.

The Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) administered by the Health Resources and Services Administration (HRSA) supports states as they explore initiatives addressing such concerns. This brief summarizes three MIECHV-supported initiatives that use targeted professional development and training to help home visitors navigate sensitive topics:

- Maryland’s Home Visitor Training and Certificate Program
- Region X Home Visiting Innovation Award Project (Washington, Idaho, Oregon, and Alaska)
- Louisiana Home Visiting Innovation Award Project

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Maryland’s Home Visitor Training and Certificate Program

About: Developed in 2015, Maryland’s Home Visitor Training and Certificate Program helps participants develop key competencies and practice addressing sensitive topics. A randomized control trial was conducted to test the program’s effectiveness.

Goals and Purpose: The program seeks to build home visitors’ and supervisors’ skills approaching difficult topics in order to strengthen the quality of services delivered. Topics include domestic violence, substance use, poor mental health, and child behavior management. The evaluation aims to better understand how visitors communicate with families around sensitive topics and to test the impact of the training on home visitors’ knowledge, attitudes, confidence, and skills.

Participants develop key competencies and practice addressing sensitive topics like domestic violence, substance use, poor mental health, and child behavior management.

Who is Involved: The Maryland Department of Health serves as the lead agency. Faculty from the University of Maryland, Baltimore County, developed and implement the program. The evaluation is being conducted by the Johns Hopkins University Bloomberg School of Public Health. The program team also works with an advisory board comprising program managers, supervisors, and home visitors from models implemented across the state.

Notable Details: The Home Visitor Training and Certificate Program is grounded in adult learning principles and the theory of training transfer in the workplace. Participants receive 7 days of instruction spread out over 3 months (see sidebar).

These 6 topics were chosen based on focus groups with nearly 30 home visitors and supervisors, a deep review of the research evidence, material covered in existing trainings, and observations of home visiting practices. Participants engage in interactive exercises and role plays to practice, reflect, and problem solve as a group. Assignments given in between training days

The Home Visitor Training and Certificate Program includes six modules:

- Motivational Communication Concepts and Skills
- Creating Healthy Partner and Family Relationships
- Promoting Healthy Child Development and Positive Parenting
- Supporting Families’ Mental Health
- Addressing Substance Use
- Cultural Sensitivity and Home Visiting with Diverse Families
help reinforce the course material. Supervisors also complete the program, so they can better support their employees and incorporate its content into reflective supervision.

**Accomplishments:** To date, the team has—

- Trained approximately 60 home visitors and supervisors
- Randomly assigned 14 home visiting programs to the training group or control group and collected evaluation data before and after the training
- Presented preliminary findings from the randomized control trial at the MIECHV All-Grantee Meeting
- Begun developing a smartphone app to reinforce knowledge and skills among program graduates
- Begun developing a web site with resources for program graduates and the public

**Implications:** Home visitors need concrete strategies for engaging families on sensitive issues. Evaluation of Maryland’s Home Visitor Training and Certificate Program will increase the field’s understanding of how an interactive training program can augment these skills. Preliminary results suggest that the training had positive immediate impacts, but ongoing reinforcement of skills through supervision or coaching may be necessary to maintain skills over the long term.

**Upcoming Activities:** The team will work to—

- Identify ways to reinforce training in follow-up booster sessions or web-based materials
- Explore the use of online training modules to substitute for or complement in-person sessions
- Engage stakeholders across home visiting models and state agencies to see how the program can facilitate a more synthesized approach to training in the state
- Develop training, supervision, and coaching to address related topics, such as family-centered goal planning, to promote engagement and service tailoring

**For More Information:** Visit the [Home Visitor Training and Certificate Program](http://www.nhvrc.org) web site, or email David Schultz ([dschultz@umbc.edu](mailto:dschultz@umbc.edu)) or Allison West ([awest25@jhu.edu](mailto:awest25@jhu.edu)).
Region X Home Visiting Innovation Award Project (Washington, Idaho, Oregon, and Alaska)

**About:** In fiscal year 2017, the Washington Department of Early Learning received a HRSA Home Visiting Innovation Award to study the home visiting workforce and build its capacity through innovative professional development. The award supports a joint proposal from Washington, Idaho, Alaska, and Oregon, the four states within HRSA’s Region X.

**Goals and Purpose:** The project aims to develop home visitors’ capacity for engaging with families who have experienced trauma by connecting them with scientific evidence and providing trauma-informed tools, training, and ongoing coaching. The project team will conduct a formative evaluation of three professional development interventions. Evaluation results will be used to modify interventions to enhance implementation.

The project aims to develop home visitors’ capacity for engaging with families who have experienced trauma by connecting them with scientific evidence and providing trauma-informed tools, training, and ongoing coaching.

**Who is Involved:** The project reflects a unique collaboration among four neighboring states. The Washington State Department of Early Learning serves as the lead agency, working closely with the Oregon Health Authority, Idaho Department of Health and Welfare, and Alaska Department of Social and Health Services. The team is contracting with the University of Denver’s Butler Institute for Families to conduct a regionwide workforce study and with state infant mental health associations to lead a reflective supervision collaborative and to develop new guidelines for reflective supervision. Seattle-based Thrive Washington will provide training on its NEAR@Home toolkit, one of the interventions being evaluated. Portland State University will be evaluating the implementation process to guide broader replication of these innovations.

**Notable Details:** Region X awardees will implement and evaluate—

- The NEAR@Home toolkit designed to help home visitors feel more comfortable conducting trauma screening

- The FAN (Facilitating Attuned INteractions) tool designed to promote mindfulness and self-awareness in home visitors so they are better attuned to families’ needs and can more effectively engage and support parents dealing with challenging infant behaviors

- A new intervention model being developed by a team of design experts, technology experts, and home visitors to help home visiting programs effectively address concerns around mental health, domestic violence, and substance use

The innovation award will support the collaborators as they pilot the NEAR@Home toolkit in all four states and develop a toolkit readiness assessment for home visiting programs. Additional
efforts include developing reflective supervision guidelines specific to home visiting and a survey of the home visiting workforce to examine staff experiences and needs.

**Accomplishments:** To date, the project team has—

- Identified and contracted with implementation and research partners
- Identified and trained NEAR@Home toolkit facilitators in each state
- Established a reflective supervision collaborative, which will engage with national home visiting models
- Convened a working group to begin planning a survey of the home visiting workforce

**Implications:** The implementation and evaluation of this set of program enhancements will increase their utility for the broader home visiting field. Similarly, creating reflective supervision guidelines will help the field establish terminology and set expectations for practice.

**Upcoming Activities:** The project team will work to—

- Implement the initial NEAR@Home toolkit and FAN trainings
- Develop reflective supervision guidelines
- Launch the home visiting workforce study in late 2017

**For More Information:** Email Laura Alfani ([Laura.Alfani@del.wa.gov](mailto:Laura.Alfani@del.wa.gov)) at the Washington Department of Early Learning. For more information on the NEAR@Home toolkit, visit the [Thrive Washington web site](#).
Louisiana Home Visiting Innovation Award Project

About: In fiscal year 2017, the Louisiana Department of Health received a HRSA Home Visiting Innovation Award to develop and retain a highly skilled home visiting workforce. The state is adding infant mental health specialists to its 17 home visiting teams across the state to increase home visitors’ capacity to support clients with mental health.

Goals and Purpose: The project aims to help home visitors better navigate their clients’ mental health needs. Regularly connecting with an infant mental health specialist can help home visitors become more comfortable and knowledgeable recognizing and supporting mental health and trauma symptoms and related child development concerns. Families will likely benefit from early identification, program-based interventions, and improved referral strategies.

Who is Involved: The project is being implemented in the Louisiana Department of Health, Office of Public Health, Bureau of Family Health, which administers the state’s MIECHV program. The infant mental health team consists of 13 licensed mental health professionals; all 145 home visitors across the state participate in the project, as do team supervisors and other state-level team members. Other partners include faculty at Tulane University and University of Louisiana at Lafayette, as well as several contract agencies that employ home visiting staff and some of the infant mental health specialists.

Notable Details: The project will structure mental health consultations to focus on parent-child relationships, diversity-informed practice, and trauma-informed care, in addition to maternal depression and anxiety. Infant mental health specialists will attend case conferences, meet with home visitors and team supervisors individually, lead training booster sessions, and conduct joint visit assessments with home visitors. When challenges are identified, they will work with home visitors to understand clients’ needs, connect them to resources, and integrate relevant model materials into home visits. The project also focuses on building relationships with local community providers, with the goal of identifying existing providers and improving the referral process.

Accomplishments: To date, the project team has—

- Assigned a designated infant mental health specialist to each of the state’s 17 home visiting teams
- Conducted an initial self-efficacy evaluation to assess home visitors’ ability and confidence addressing issues surrounding trauma and poor mental health
Developed content for in-service sessions on parent-child relationships, diversity-informed practice, and trauma-informed care

Designed evaluation materials to assess home visitors’ knowledge and satisfaction related to the booster sessions

Conducted three booster sessions on parent-child relationships and found a statistically significant increase in home visitors’ content knowledge

Implications: Louisiana’s efforts will raise awareness of the mental health needs of families with young children and the benefits of integrating infant mental health specialists into home visiting programs as a dedicated resource. Information collected around community partners and referrals will inform and potentially change the way referrals happen at a systems level.

Upcoming Activities: Project staff will work to—

Continue implementing the infant mental health consultation model and collect information from infant mental health specialists on their progress

Prepare and implement remaining booster sessions

Continue collecting evaluation data to make needed adjustments and improvements to the consultation model and trainings

Track referral processes to identify barriers to successful referrals to community resources for mental health needs

For More Information: Email Gina Easterly (Gina.Easterly@la.gov) at the Louisiana Department of Health.

Summary

Home visitors commonly work with families facing a range of life stressors. Regularly engaging in conversations around mental health, substance use, intimate partner violence, and other sensitive topics raises professional challenges, and home visitors can benefit from additional support. The initiatives summarized in this brief highlight the potential value of program enhancements and professional development targeted to these issues. Initial work suggests that efforts should be grounded in science, apply adult learning principles, and integrate reflective supervision.