



**Voices from the Field:
The Experiences of the
District's Home Visitors**



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Introduction

This Home Visitor Experiences Report, compiled using a combination of survey and focus group data, is intended to capture the full experience of the important, yet understudied and undervalued, District of Columbia home visiting workforce. The report shares District home visitors' perspectives on their roles, what drew them to the field, and the stressors that motivate many to transition out of it. The findings of this report will inform the District's Home Visiting Council's work to support home visitors as an important and uniquely positioned part of the early childhood workforce. We hope that this report will also inform policymakers about the role and status of home visitors, as well as opportunities to strengthen this important field.

The Home Visitor Experiences Report is a product of the DC Home Visiting Council. The Home Visiting Council is a coalition of home visiting providers, managed care organizations, local government representatives, early childhood advocates, and community-based programs. Members aim to strengthen the understanding, implementation, and sustainability of home visiting as a strategy to support positive child and family outcomes in the District of Columbia. Specifically, the Home Visiting Council works to enhance the early childhood system by ensuring responsive family support programs are available and accessible to expectant parents and the families of young children, secure local funding to maintain these services, and ensure home visitors have what they need to do their job.

Survey Methodology and Data Collection

To inform this report, the Home Visiting Council developed and administered a voluntary survey to home visitors across the District and held a series of focus groups with additional home visitors.

The survey included 65 questions about professional development, supervision, compensation and benefits, cultural competency, the work and organization environment, and other relevant aspects of the experience. The Home Visiting Council administered the survey using SurveyMonkey and received responses from 58 home visiting program staff who provide home visiting services representing all 13 of the District's home visiting program locations..

Alongside the survey, the Home Visiting Council hosted five focus groups. Three of these focus groups were held in person and two were held virtually, due to the safety precautions put in place by the COVID-19 pandemic. Both of the virtual groups were facilitated in Spanish. In total, the focus groups included 24 individual home visitors representing 8 home visiting organizations.¹

What is home visiting?

Home visiting is a two-generation prevention and early intervention service delivery strategy for expectant parents and families with children under age five.² In these voluntary programs, trained home visitors and participants regularly meet in the home or another comfortable setting designated by the family to address families' needs and work to support outcomes in some or all of the following areas:

- Child and family safety
- Pregnancy
- Timing of subsequent births
- Maternal or child health
- Parenting skills and practices
- School readiness
- Social, emotional, and cognitive development of children
- Parental education, employment, and other parental factors linked to child development

1. A full list of home visiting organizations can be found in our 2020 Annual Report.

2. 2020. 2019 Annual Report Of The District Of Columbia Home Visiting Council. [online] p.5. Available at: https://www.dchomevisiting.org/uploads/1/1/9/0/119003017/2019_home_visiting_council_annual_report.pdf

The Role of the Home Visitor

Home visitors play a unique and important role in the early childhood system by weaving together knowledge of and access to the systems that are critical to families' ability to thrive, and tailoring resources to individual families' needs. Home visitors are tasked with helping families meet large goals such as improving positive maternal health outcomes, increasing family economic health, improving school readiness for young children, and reducing child abuse and neglect, in the context of racial and other structural barriers.³ They enter the intimate setting of a family's home or another preferred location and guide the deeply personal experience of parenting or navigating a pregnancy. And, in no easy feat, they must document all of this progress within the requirements of a structured home visiting model and the program's funding stream(s) requirements. As one home visitor described it, the reality of this profession is deep and emotionally involved,

"It's like social work, case management, therapist, and cheerleader all in one job--an educator and advocate."

Home visitors' role in supporting families historically impacted by racist systems is especially notable. While home visiting can serve families from a wide range of experiences, DC home visiting programs primarily serve Black and brown families. Due to systemic racism, Black and brown families are more likely to be exposed to environmental pollutants,⁴ face barriers to safe, affordable housing,⁵ and lack access to quality health care.⁶ As a result, families may be torn between meeting their families' basic needs and chasing down the many supports available to help them meet their goals for their child's health and education, and their own financial, physical, and emotional well-being. Home visitors work with families to navigate this wide range of concerns and the stress that comes with them.

As we saw unfold in 2020, the challenges facing families can be heightened by unexpected emergencies, such as the COVID-19 pandemic, and exacerbate these unjust gaps for some families.⁷ Between the concurrent public health emergency and the national racial uprisings demanding an end to violence against Black people in this country, these families are facing compounded stressors and negative effects on their emotional, financial, and physical well-being. However, home visitors play a distinctive role ensuring families' needs are met and that families feel empowered to navigate the structures on their own for positive outcomes, even when the structures are unjustly built against their success.

4. Bell, M. and Ebisu, K., 2012. Environmental Inequality in Exposures to Airborne Particulate Matter Components in the United States. *Environmental Health Perspectives*, 120(12), pp.1699-1704.

5. Solomon, D., Maxwell, C. and Castro, A., 2020. Systemic Inequality: Displacement, Exclusion, And Segregation - Center For American Progress. [online] Center for American Progress. Available at: <https://www.americanprogress.org/issues/race/reports/2019/08/07/472617/systemic-inequality-displacement-exclusion-segregation/>

6. Young, C., 2020. There Are Clear, Race-Based Inequalities In Health Insurance And Health Outcomes. [online] Brookings Institute. Available at: <https://www.brookings.edu/blog/usc-brookings-schaeffer-on-health-policy/2020/02/19/there-are-clear-race-based-inequalities-in-health-insurance-and-health-outcomes>

7. Artiga, S., Garfield, R. and Orgera, K., 2020. Communities Of Color At Higher Risk For Health And Economic Challenges Due To COVID-19. [online] KFF. Available at: <https://www.kff.org/coronavirus-covid-19/issue-brief/communities-of-color-at-higher-risk-for-health-and-economic-challenges-due-to-covid-19/>

The home visitor experience is a unique and important one. It requires a varied set of skills, a high emotional bandwidth, and a nature of adaptability to successfully accomplish the many goals required of home visiting models. Despite the extensive demands of this workforce, the home visiting profession does not receive the prestige or earnings that one could expect based on a glimpse of the day-to-day work lives of home visitors.

Home Visitor Education and Credentialing Requirements

Home visiting, as a service delivery strategy, is implemented using models with varying educational and credentialing qualifications for home visitors. For example, home visitors who provide the Early Head Start home-based curriculum must have a minimum of a Child Development Associate (CDA) credential or a comparable credential or equivalent coursework as part of an associate's or bachelor's degree.⁸ The two most utilized models in the District, Parents as Teachers (PAT) and Healthy Families America (HFA), have fairly similar requirements. Parents as Teachers requires parent educators, at a minimum, to have a high school diploma or equivalency and two years of supervised work experience with young children or parents.⁹ Healthy Families America's model requires a high school diploma or bachelor's degree.

Home Visitor Demographics

Home visitors nationally

According to a national survey conducted by the Urban Institute, 99% of home visitors are women and majority are white.¹⁰ Their ages range from 20s to late 60s. Most provide their services in English, but 17% of home visitors are fluent in Spanish. It is a broadly educated workforce, with 70% of home visitors operating with a bachelor's degree or higher. Years of experience range from 69% of home visitors having at least three years of home visiting work experience to the remaining 31% who are new home visitors. On average, home visitors reported earning \$713 a week, which is less than workers in similar occupations, but reflective of the wage penalty that commonly affects early childhood professionals.¹¹ The median salaries of surveyed participants are approximately \$37,000 a year for a full-time role, with nurse home

8. ECLKC. 2020. Education Requirements For Home Visitors | ECLKC. [online] Available at: <https://eclkc.ohs.acf.hhs.gov/publication/education-requirements-home-visitors>.

9. 2018. Parents As Teachers: Essential Requirements For 2018-2019. [online] Available at: <https://static1.squarespace.com/static/56be46a6b6aa60dbb45e41a5/t/59bc3b9046c3c4ee1974b66b/1505508240435/proposed-updated-essential-requirements-18-19.pdf>

10. Sandstrom, H., Benatar, S., Peters, R., Genua, D., Coffey, A., Lou, C., Adelstein, S. and Greenberg, E., 2020. Home Visiting Career Trajectories. Urban Institute. Available at: https://www.urban.org/research/publication/home-visiting-career-trajectories/view/full_report

11. Early Childhood Workforce Index 2018: Earnings & Economic Security. [online] Center for the Study of Child Care Employment, University of California, Berkeley. Available at: <https://cscce.berkeley.edu/files/2018/06/3-Earnings-Economic-Security.pdf>

visitors reporting the highest earnings, more than home visitors with early education degrees and backgrounds.

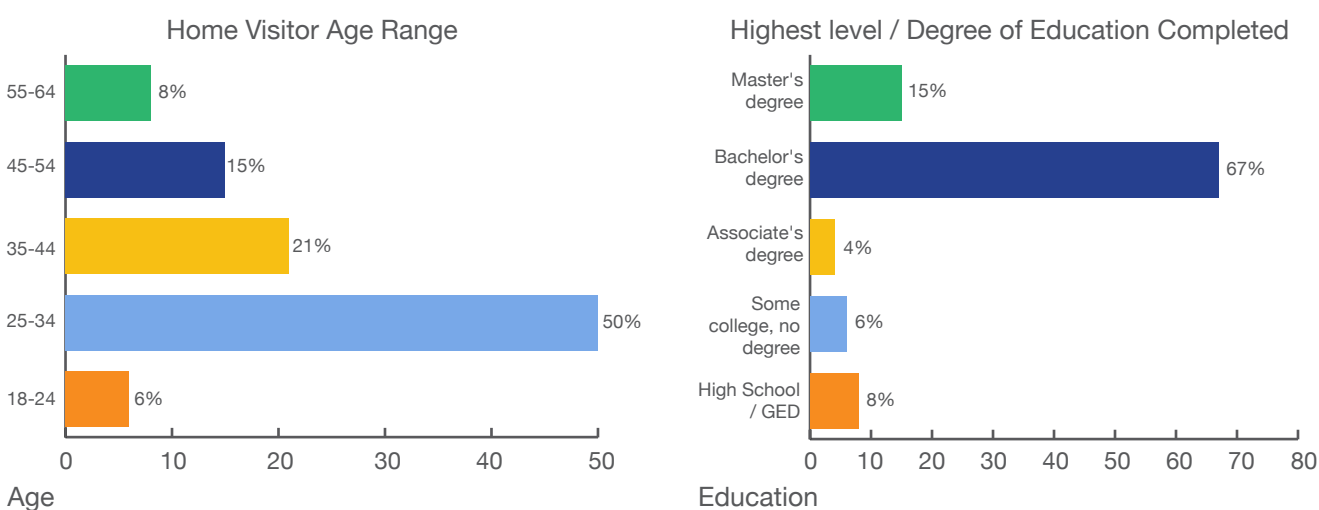
Nationally, 99% of home visitors are satisfied (77% completely satisfied and 22% somewhat satisfied) with the rewarding work with families, 90% are satisfied with the training and professional development opportunities made available to them (54% completely satisfied and 36% somewhat satisfied), and only 46% are satisfied (11% completely satisfied and 35% somewhat satisfied) with their pay.¹²

District of Columbia home visitors

As is the case nationally, the majority of the District's home visitors (84%) also identify as women, according to the Home Visiting Council's survey of the workforce. Over 56% of the workforce are 34 years old or younger. Unlike home visitors nationally, the majority of the DC workforce are women of color: at 56%, Hispanic/Latinx individuals constitute the largest portion of home visitors, followed by Black home visitors (27%), and white home visitors (12%). Nearly 64% of the District's home visitors can provide their services in Spanish.

Slightly higher than the national rates, 81% of home visitors hold a bachelor's degree or higher. Many home visitors had a background in child development, early childhood education, social work, public health, or psychology, among others. Years of work experience ranged: 23% of home visitors have provided home visiting services for two years, while 19% held nine or more years of experience and the remaining fell in between.

In the District, 73% of home visitors are satisfied with their role as a home visitor, which is lower than the national satisfaction rate. While they find their jobs and the relationships they build with families deeply rewarding, the workforce desires greater compensation, worries about burnout, and seeks more opportunities for professional growth.



12. Sandstrom, H., Benatar, S., Peters, R., Genua, D., Coffey, A., Lou, C., Adelstein, S. and Greenberg, E., 2020. Home Visiting Career Trajectories. [online] Urban Institute. Available at: <https://www.urban.org/research/publication/home-visiting-career-trajectories/view/full-report>.

Main Themes

Rich survey responses and conversations with home visitors offered a glimpse into the rewarding and complicated experience of working in this field. In each focus group, the facilitator engaged home visitors to speak freely about the challenges, needs, and emotions they face in their day to day job. Similar to how no two home visits are alike, every individual had their own story to share. However, commonalities among home visitors emerged; these are outlined below with accompanying direct quotes from the home visitors themselves. While these findings summarize themes heard across the survey and focus groups, every finding may not apply to every program or home visitor.

- **Home Visiting is a Deeply Rewarding Profession**
- **For Home Visitors, Success Looks Like Building Trust With Their Family**
- **Home Visitors Desire an Improved System of Care**
- **Misconceptions Around Home Visiting Create Barriers for Home Visitors**
- **Personal Safety is a Major Concern for Home Visitors**
- **Home Visitors are Frustrated By Heavy Administrative Workloads**
- **Home Visitors Want More Support and a Better Work-Life Balance**
- **Home Visitors Plan to Leave the Workforce Due to Low Pay and a Lack of Professional Growth**
- **Home Visitors Seek More Tailored Training and Professional Development Opportunities**

■ Home Visiting is a Deeply Rewarding Profession

Home visitors are inspired by the relationships with participating families and find great reward in watching both parents and children grow and succeed over time.

Home visitors find the meaningful connections they make with families and the positive impact of their work to be the primary benefits of their job. In interviews, they described this role as a unique opportunity to support lasting change, working in direct partnership with families, infants, and children. Home visitors shared countless stories of how their experiences helping parents to feel empowered and to reach their goals was an important source of motivation and energy for their work. One home visitor told us:

“Seeing that family smile when you know they haven't smiled, like they look forward to you coming in and having that interaction with them and doing an activity, like it means everything.”

Other home visitors shared their rewarding moments with families:

- *“I also feel successful in my job when I see a child's development is increasing and they are growing in their development. Then I can see that these home visits are worth it.”*
- *“With my families, usually if we have a goal and it's met, that's a success. But even if it isn't met, if we somehow were able to maneuver around it or make something happen that might not have been what the end goal was originally but still make it through that, that's a success.”*
- *“I also feel like I'm successful when they can advocate for themselves in their role as a parent. When parents advocate for themselves, even in front of their spouses or boyfriends, I feel great that they've kind of taken on that strength, and I feel good.”*
- *“That's why I stayed in this position, because I discovered that it's a lot of people outside that need me, need my skills, need my passion.”*
- *“Some don't really have anyone to talk to. So knowing that I'm going to be like that extra support for them I think motivates me.”*
- *“Sometimes for me, it's knowing that I am someone's accountability partner. So if they make goals, whether they uphold their goals or not is up to them. But being the person that's like, hey, like I'm checking in on this and they're like, thank you. So that does it for me.”*
- *“It's just really cool to work with families and give them the tools to be that best advocate for their kid. And I also think working with the vulnerable population, especially young parents, a lot of people don't take young parents seriously.”*

- *“It's a very exciting time to be in early education, because we see more and more in research how important it is to have early intervention and really set kids up for going to kindergarten and being successful in school. So it's just really cool to work with kids to get them to that point. And then also having parents know what that point is and what they can do in their home to get them to that point.”*
- *“It's kind of a satisfaction when you help families to achieve something that they think that it was impossible”*

■ For Home Visitors, Success Looks Like Building Trust With a Family

Home visitors work hard to develop strong relationships with families, and measure their success by this trust.

While home visitors were motivated every day by the rich relationships they have with their families, they made it clear that building the deep trust that is particular to home visiting is not an easy feat. Families who feel comfortable with their home visitor are able to better explain their needs, offer them a clearer picture of the challenges they may be facing,¹³ and ultimately, offer more direction for their home visitor to support them to meet their goals in the best way possible.¹⁴ Physically entering someone's space and supporting experiences like parenting or a pregnancy can be an extremely intimate and vulnerable experience for families. It requires social acuity, cultural humility, and patience to build a genuine relationship of trust. For many of the home visitors who participated in the survey and focus groups, gaining this trust was the best marker of success.

“I feel that I'm successful when the families are trusting me and what I'm doing for them. And they're prioritizing, talking to me more openly and telling me their needs, and they feel free to let me know, for example, when they are having problems or they are having violence in the house and they feel open to talk. Then I feel, oh my gosh, so I'm being successful. They trust me and they can communicate these kinds of issues that they are having in the family. So then I feel, okay, I'm doing good because they trust me.”

Other home visitors shared their examples of success:

- *“I think when parents disclose sensitive information, you definitely feel like you've got a win, [because it means they trust you].”*
- *“I feel like my job is successful when the families are open. If they trust me I feel like that's a big success. And if they accomplish their goals, of course, that's big.”*

13. n.d. Home Visitor's Handbook. [pdf] Early Head Start National Resource Center @ ZERO TO THREE, pp.13-16. Available at: <http://homevisiting.org/assets/Head%20Start%20Home-Based%20Program%20Option%20Handbook.pdf>.

14. Schaefer, J., 2015. Personal Characteristics of Effective Home Visitors. *Journal of Social Service Research*, 42(1), p.88.

- *“So we set our boundaries with them, but what boundaries do you have with us? What do you want us to respect? Is it something as simple as taking my shoes off when I come into your home, or as far as letting you read my aura while I'm sitting there? I might not have any experience with that, but I'm also not going to be disrespectful, because, again, you want to meet them where they are and you want them to be comfortable so they can receive the information that we're going to give them.”*
- *“There are families that wait for you with open arms, it is nice to go to those homes. But there are other families that act as if they are doing you a favor by opening their doors and that is challenging.”*

■ Home Visitors Desire an Improved System of Care

Home visitors are first-hand witnesses to the need for an improved, cohesive, and reliable system of programs and services for expecting families and families with young children.

Home visitors cannot fully support families as they strive to accomplish their goals if the system serving them is not designed or equipped to meet families' needs. Home visiting programs empower families to navigate health services, housing supports, education, and financial systems, and more on their own. Home visitors shared a lack of confidence directing their families towards other community resources, knowing there might be the possibility that the program will not adequately answer the family's questions, aren't accessibly located for the family, or may not exist at all. This disconnect does not benefit the family or the reputation of home visiting when clients are referred to a service but the service fails to meet their needs or does not match the level of respect that home visitors provide. A need for a comprehensive, coordinated array of trusted and dependable services from their organization came out of these conversations.

“If we refer people for some places [organizations or services offered in the District] that don't even exist sometimes, they don't have the kind of services that the family needs. Okay, are you going to refer a family to somewhere or someone that is not helping and they are wasting that time, wasting money to pay for a bus, and going to places that are not really safe?”

Other home visitors shared their frustrations with the existing system of services in the District:

- *“I think all the referrals and sending people to different places can sometimes give home visiting a bad rep, because a lot of times it's like, ‘Oh, I can refer you to this program,’ and then that program is just not equipped to deal with what this family has going on. So it's just like, ‘Oh, well then, let's try this person.’ It's like, you've referred me to three different people. None of them speak my language.”*

- *“I'm not going to be like, ‘Oh, I'm going to refer you to this place that's all the way northwest and you got to pay to get there.’ So access I think to these referral places is limited too.”*
- *“And when they exist maybe they don't treat the families with the kind of respect that they deserve. And that they might have reputations that will keep the families from wanting to go.”*
- *“Coming up with a system to point families and us as home visitors in the right direction would be helpful.”*

Misconceptions About Home Visiting Services Create Barriers for Home Visitors

It is not uncommon for families to initially view home visitors as negative authoritarian figures entering their home, based on their experiences with other programs.

Home visitors shared that families’ negative experiences with law enforcement, immigration enforcement, and child protective services, as well as unclear messaging about home visiting, may lead to initial distrust of support workers entering homes in many communities. While the value home visitors bring often enables them to overcome initial distrust, they described these negative experiences with enforcement agencies and the misconceptions that result as barriers to recruiting, enrolling, and building trust with families. These observations align with research about home visiting messaging and its impact on families’ interest in participating.¹⁵ However, this can be a frustrating disconnect for home visitors who view their role as to preserve families, not tear them apart.¹⁶

Home visitors also suggested that unclear information about home visiting may also impact home visitor staff recruitment on a larger scale. They believed that attracting a pipeline of qualified home visitors may be a challenge moving forward, if home visiting is not better understood by the general public and if the role of home visitor remains undervalued.

“I think a lot of people think of home visiting and home visitors as punitive. I think there's this weird association with CPS and home visitors. So hearing people talk about my job and then also talking to clients about my job, there's this common misconception that we're in the business of going and tearing apart their family structure.”

15. 2015. MIECHome Visiting Issue Brief On Family Enrollment And Engagement. MIECHV TACC. [online] US Department of Health and Human Services; Human Resources and Service Administration, pp.6, 16. Available at: <https://mchb.hrsa.gov/sites/default/files/mchb/MaternalChildHealthInitiatives/HomeVisiting/tafiles/enrollmentandengagement.pdf>

16. Pew Charitable Trusts. Family Support and Coaching Programs: Crafting the Message for Diverse Stakeholders (October 2015). Accessed at: https://www.pewtrusts.org/~media/assets/2015/10/Home_Visitingmessagingbrief.pdf

Other home visitors heard similar concerns from families:

- *“So when you say, ‘Oh, I’m a home visitor.’ ‘Oh, do you work for CPS?’ It’s like, wait, whoa. No. I’m trying to keep my families away from those systems and services.”*
- *“The word ‘home visit’ I think is associated with those systems (CPS)”*
- *“They think you’re the police.”*
- *“They think you’re going to take the kids.”*
- *“I would like to see that myth busted a little bit more throughout the community.”*

Home Visitors are Frustrated By Heavy Administrative Workloads

Burdened by administrative work and reporting requirements, home visitors struggle to complete their work within a typical 40-hour week.

Home visitors expressed feeling overwhelmed by strenuous workloads and long hours of overtime. When asked if they had enough time to do everything their program expects them to do, only 28% agreed. Alongside the visits themselves, much of their time is spent on often duplicative documentation and administrative work to meet organizational, funder, and model requirements. They described being required to repeatedly enter the same information from their home visit notes into several software systems.

Some home visitors believed that the timing and nature of documentation requirements - which are often subject to funder requirements and include collecting personal and sensitive information early in the program - can be damaging to their relationship with their families. They described feeling that the questions they are required to ask can seem intrusive or inappropriate. Home visitors also suggested that the timing of the documentation makes it less likely that the information they collect is accurate, as families may not feel secure enough to share the intimate personal information being asked. Nearly one-quarter of home visitors believed that they do not have enough time to develop a trusting relationship with their families before they are required to collect sensitive information from them.

Ultimately, most home visitors feel that their priority should be supporting families through crises or with everyday challenges rather than collecting and reporting data. While reporting requirements vary greatly across programs, funder requirements - including those of local and federal public funding agencies - often take priority over program model requirements and strategies designed to support families to ensure meeting requirements of a contract or grant. Home visitors often do not see how the data or information they are entering directly supports the families and demonstrates the quality of their work. Streamlined, user-friendly data systems might alleviate these common issues.

“I think if I had less organization-wide responsibilities, I would probably be less stressed. Because then all I would have to worry about are my families.”

Other home visitors shared their struggles with their workloads:

- *“I'm not going to rush the visits. I'm going to be there for however long I need to for them to process the information. But I still got to come in on that Saturday to get your documentation done on time in the deadlines. So I mean, it's helpful to be able to, if I have a late visit, come in a little bit later the next day. But I don't think there is enough time in the day to get it all done. And we're not compensated for that extra time that we do at home.”*
- *“What takes a lot of time, I feel like it's the system. There is so much documentation, we have to document one thing like five thousand times and there's a program here and another program there. That takes a lot of time and sometimes the system is not working, our password expires, so we have to call to resolve the problem. Everything ends up becoming more complicated than one wants and it takes more time to get the job done.”*
- *“This is just another paper that says the same thing as our notes that we're doing. That we have to submit. It kind of takes away from just the visit, the whole purpose. I love doing it, I love being able to talk to families, but it's like, having all this paperwork”*
- *“There's a lot of [paperwork] duplication.”*
- *“It's like repeating everything, just repeating. Why instead of keeping this in the system, why do we have to get a paper and put it in a file and take care of the paper, take care of the system. If we update the information in the system and we forgot to update the paper, then we are in trouble.”*
- *“Oh, especially when you finish your eight hours, do you think that you complete your work with that? No, we continue at home. We continue going in the system. And sometimes my child will say, ‘Mommy, why [are you] late? You don't work eight hours, Mama. You work more than overtime.’ But they need it in the system- the information. We need to put it there.”*
- *“It's kind of hard doing paperwork in the evening when you have to deal with family.”*
- *“There is not enough time to do everything. Because apart from doing the creative curriculum, we have to enter information in, and also make teaching strategies, which is quite time consuming. Doing lesson plans every week. The most difficult thing is that all children have different ages, so you practically must do one for each family.”*
- *“I practically get paid for a part-time role but work full time. Because it's a lot of work that has to be done.”*

- *“Honestly, no [I don’t complete all the work in a week]. I feel like it’s a lot. Just because a lot of things get piled on. Every day is different. You just never know. If you have a high caseload, sometimes it’s hard to do, follow up when you’re following up on 15 people or more.”*

Home Visitors Want More Support and a Better Work-Life Balance

For home visitors, the emotional toll of the job is high. There is a need for more support when it comes to managing the workload, safety concerns, using personal resources, and prioritizing self-care.

As with other helping professions¹⁷, home visitors expressed struggling to maintain clear boundaries between their work and own home life in trying to keep up with their responsibilities. Home visitors described spending their personal time submitting documentation or answering calls and texts from families. While organizations may inform their staff that it is not their responsibility to support families outside of work hours, home visitors recognize that being reliable is important for maintaining a trusted relationship with the family. Home visitors understand that it is their job to empower parents to navigate challenges themselves, rather than having to hold their hand through every step. However, it is difficult for many home visitors to set strict boundaries when families are often facing constant challenges.

Some home visitors also expressed dissatisfaction with using their own resources, like their car or cell phones, to perform their jobs, which they described as an example of tapping into their own personal reserves for their job.

It is also a challenge to separate the emotional distress they often witness from the families they support from their personal lives. Engaging in self-care during their time out of the office is difficult when they are absorbing the stresses of their home visiting families and some are spending the weekends completing their extra administrative work. While 60% of home visitors agreed that their supervisors provided resources and tools to manage stress, the concerns about balance still remain. Time management strategies, flexible hours, and overtime compensation may be helpful to clarify the blurry line between home visitors’ personal lives and career, but such measures would require increased support from funders.

Home visitors also expressed anxiety about their personal safety during visits, especially if they do not have an existing relationship with the community or if there is hostility due to the misconceptions around their role, as described earlier. Home visitors often enter unpredictable environments to do their work and while perceptions of the danger of their job vary across home visitors, issues of domestic violence, substance use, or other distractions can arise in the presence of home visitors. Focus group responses indicated unaddressed safety concerns may impact retention. Adding or clarifying guidance around navigating these safety issues to an organization’s policies may help alleviate some of these stressors.

17. APA Dictionary of Psychology. (2021). Retrieved from <https://dictionary.apa.org/helping-professions>

“I think a big sacrifice that people need to know about home visitors is our self care. Like we sometimes have to put that on the back burner to do our job.”

Other home visitors shared their ongoing challenge to create boundaries in their work:

- *“It takes real discipline. Like mental discipline to separate work from home. It can be difficult but rewarding.”*
- *“You're also wearing like 15 other hats”*
- *“That's also something that frustrates us because sometimes they forgot that we have families too.”*
- *“ It's really frustrating because I have to do documentation and notes on a Saturday because I just can't stay late at work. And I don't want to bring work home with me, because I realize that doesn't work with my self care. Like I have to, if I'm going to be invested, I'm going to go home crying if I have to be writing this note about what we just discussed. So I try really hard to separate that.”*
- *“We never get [enough] compensation. Not even payment for extra time working. Sometimes we have to be early in the morning in the houses because they call us during the night, ‘I have an emergency and I need to go to the clinic or to the hospital and I need you to assist me.’ I have some families, they don't speak or don't write English or Spanish. And I have to be with them in the hospital or clinic when they need me, because they have a really hard situation or they have a procedure that they cannot do alone.”*
- *“I picked her up to get to the hospital...and I stayed in the hospital...and I left when I saw when the baby was born. But they will say to us, ‘But it's not your job to answer the phone.’”*

Many home visitors expressed concern for their personal safety during visits:

- *“You don't know what you're going to walk into. You don't know if they just got done smoking. You don't know if they have company who's intoxicated. But I try really hard to go in and make sure that my body language is approachable, no matter what setting I'm kind of going into.”*
- *“There's nothing in our policies that talks about safety issues, like ‘if you don't feel safe, don't do it.’”*

Low Pay and a Lack of Professional Growth May Lead to Lower Staff Retention

While the rewarding nature of the job maintains home visitor retention, some home visitors report they are considering leaving the workforce largely due to low compensation and the limited room for growth in their profession.

While home visitors shared their deep passion for their job and the skills they have acquired from this role, about a third of the survey respondents reported that they do not plan to remain in their position for the next two years and many of the participating home visitors in the focus groups confirmed this desire to leave their role within a few years. Many home visitors don't intend on staying in their job as a long-term career because of the lack of fair compensation, the cost of living in DC, and limited trajectory for professional growth in a field that continues to be unrecognized. Only 34% of survey respondents were satisfied with their salary - which is often bound by program funding - and only 52% of the respondents reported receiving an annual increase to their compensation each year. More than half of home visitors reported that their job benefits, regarding insurance, paid leave, and more, were inadequate. When asked about any additional benefits they would like to see for their roles, there was an emphatic desire for free or affordable employer-based health insurance.

Several individuals explained that the trauma and stress experienced on the job isn't sustainable to continue for a lifelong career choice, without additional support. The long hours, constant stress, and concerns about safety ultimately impact their personal lives, stress levels, and morale. These factors, compounded by a lack of compensation, recognition, and room for growth, threaten the sustainability of and suggest that support is needed for this important workforce.

“Nobody wants to be complacent. In this field, you can get very complacent, because the pay is low, but there's no room for growth. You can be the best at it and you'll still be running in place.”

Other home visitors expressed their frustrations around compensation and opportunity:

- *“The pay, the cost of living in DC is extremely high.”*
- *“The pay is average, and like we said, the safety. So those are the factors that would make me want to leave.”*
- *“The only reason why I would [leave] is probably for more money or if I needed to. But I truly love to work with families and that's probably why I'm still doing it.”*
- *“If another opportunity opens up where I feel safer. I feel like, honestly, in this role, I know how to do the role and that's it. It stops there. I don't feel like there's nothing that's going to help me progress to the next level, staying in this position. So that's why I know I'm definitely not going to stay in this role way too long. I really want to be able to grow in myself. I am a recent graduate, so I'm done [with] school. I'm just, my mind is like, ‘Okay what else can I do next?’”*

- *“The older you get, you don't want to be stressed all the time. There's literally, like, last night I barely got sleep because I'm thinking about, ‘Oh, I got to do this, this, this tomorrow at work. I need to get there early because I got to catch this parent and this parent because I need them to sign this by Friday so when I got here, I can say I had this done.’ That ain't no way to live.”*
- *“How long can you really take that on until you get burned out? So I don't really know what the cap is on it. Personally, for me, talking right now, I'd say probably no longer than three years.”*
- *“It's just a cap, there's only so high you can go.”*
- *“Probably better opportunities. Career development. I feel that we don't have so much space to grow. It is more parallel.”*
- *“You're either a home visitor, program manager, or supervisor. There's not really anything else.”*
- *“It does seem like there's a career plateau in home visiting.”*

Home Visitors Seek More Tailored Training and Professional Development Opportunities

Home visitors report that training resources are available but desire a wider range of topics that would better align with families' needs. Home visitors also want increased access to professional development opportunities from their organizations.

Though most home visitors described receiving plenty of training each year, with 81% of survey respondents reporting they take advantage of professional development opportunities made available to them, some wished to provide input on the subjects covered in those training offerings, based on what would be most helpful for the families they serve and their own professional development. They shared an interest in training focused on mental health, domestic violence, social-emotional development, child development, children with disabilities, and basic safety and medical information.

Home visitors also expressed a desire to engage in more learning opportunities like conferences. Often, limited organizational finances were the barriers to these opportunities. Sometimes, it was a lack of time. But it was clear that home visitors desired more educational support in order to better serve their families' needs, grow their confidence in supporting families with certain topics, and further their professional growth.

“Opportunities for educational growth. Because a lot of my friends in other fields get their Master's paid for. In social work, that's kind of unheard of. But if we were able to get some of school paid, then I would definitely stay for five years.”

Other home visitors describe their training preferences:

- *“I think if there was training in some of these other professions would help us home visitors better explain those topics to families. Like I wish there was more access to medical training on just sometimes the basics.”*
- *“I wish that there was more access for us in other topics besides home visiting.”*
- *“Sometimes we get information that we really don't need. And instead of something that is going to be helpful for us and our families, they spend money on resources for the teacher, how to accommodate the classroom, how to do this in a classroom, how to do that in a classroom, how to collect data for this in a classroom. Something that really doesn't help us a lot.”*
- *“We need information about our job. Something related to the families that we work [with]. How to be successful with families.”*
- *“We need support to train how to deal with situations when clients are in danger, when families are reported [by] school to CPS, we don't know how to deal with them and then it feels like our job is nothing.”*
- *“When I started being a home visitor, I didn't get enough training.”*
- *“I think the value of our input is not yet where it should be.”*
- *“Other professional development opportunities allow us to attend different meetings, different trainings, like if there's different summits coming up, so we can get different information for conferences, things like that.”*
- *“Working with children with autism, or families with children with autism, things like that. Trauma-informed care. Mental illness.”*
- *“We do our own structure for professional development, which I do on my own. I'm taking my own training, taking my own certificate programs, and I think the organization could be encouraging us to, and they're not doing that.”*

COVID-19 Impacts on the Home Visiting Workforce

The home visiting workforce, like most, have experienced major changes during the ongoing COVID-19 public health emergency. While the majority of the data collection process for this study occurred prior to the public health emergency, the COVID-19 pandemic had arrived in full swing by the last few focus groups and continued throughout the development of this report. Based on additional town halls, interviews, and discussions from the Home Visiting Council membership throughout 2020, home visitors have shared how the pandemic has affected their roles and experiences:

- Home visitors are also experiencing their profession in an entirely new way. The day-to-day operation of their job looks greatly different than it did in 2019. The majority of the District's home visiting programs transitioned to virtual visits instead of in-person visits, forcing home visitors to quickly adapt to video or phone calls with their families. This requires trying out creative approaches to keeping families engaged without the in-person incentive, tweaking the nature of their interactions based on the family's needs. For some home visitors, this shift from in-person visiting requires a new set of skills entirely to engage virtually and effectively as well.
- Home visitors have pivoted to help families navigate the intense challenges the pandemic has caused and exacerbated. They have played an important role in families' lives, helping them access necessities such as food and diapers, providing them with a sense of normalcy through continued regular (virtual) visits, supporting their prenatal health, helping caregivers navigate childrens' stress-induced behavioral challenges, and identifying and responding to domestic violence concerns.
- Home visitors are navigating their own stress living in a pandemic even as they support families with more intense needs than prior to the pandemic. Just like many of the families they work with, home visitors reported experiencing higher levels of stress, anxiety, and concerns around their mental wellness, personal safety, and finances.
- Many home visitors are also parents themselves, so navigating their own time management of their personal lives alongside their work has been an adjustment. While most home visitors transitioned to telework, that also meant managing child care at home, assisting children with remote learning, and caring for other family members in addition to their work with their home visiting families.

The adaptations home visitors have made to continue supporting families during the COVID-19 pandemic demonstrate how responsive and valuable home visitors are to the families who are often the most vulnerable in times of public health emergencies and crisis. Home visitors will likely continue to adjust as the pandemic evolves, as well as in the aftermath of its effects on communities.

Conclusion and Next Steps

The home visiting workforce is made up of educated professionals who are passionate and invested in the success of the families they serve. While home visitors find their role rewarding and believe deeply in its importance in strengthening the District's families, this field faces challenges that threaten its sustainability.

Home visiting is a valuable, effective, and evidence-based practice that provides individualized support to families who need it in a way that few other programs can. So that high-quality home visiting continues to be available, the workforce needs to be well-trained to support the evolving needs of supporting families, compensated for the strenuous and emotionally complex workloads, and prepared for the prospective generations of home visitors. While many of the barriers and challenges that families are currently facing in this current climate existed before the pandemic, the recent circumstances have shown us that home visiting has been a critical support for families working to overcome these hurdles. The economic and health impacts of this pandemic will certainly last for years and a strong home visiting workforce is required to continue meeting the needs of families as they recover and grow.

Support and guidance from funding agencies, philanthropic institutions, and organizations delivering home visiting services will be necessary to support home visitors and respond to the challenges they face in their roles. In order to meet these evolving needs, the Home Visiting Council's Programs and Advocacy Subcommittee will review these findings and develop recommendations for actionable ways to support the home visiting workforce by mid 2021.

Notably, many of the frustrations about compensation and recognition highlighted in this report are also shared by behavioral health providers, child care educators, and professionals in other helping roles, signaling the need for systems-level solutions to support these important workers. We hope this report informs these important conversations.

