

A Two-Generation Approach to Home Visiting Parent Perspectives and Recommendations on California's Home Visiting Programs Spring 2022



Prepared By

Social Policy Research Associates

and

Parent Voices



Contents

Introduction	1
Overview of Parent Focus Groups	3
Motivations for Participating in Home Visiting	4
Key Themes	4
Positive Experiences with Home Visiting	5
Key Themes	5
Challenges and Missed Opportunities with Home Visiting.	8
Key Themes	8
Parent Recommendations for Improving Home Visiting	13
Home Visiting Approach & Practices	13
Timing of Home Visiting Services	15
Home Visitor Recruitment and Training	17
Home Visiting Resources	18
Home Visiting Outreach and Coordination	19
Supporting a Two-Generation Framework	20



Introduction

Existing research on home visiting programs shows that home visiting is a promising model that can improve child development and improve infant health.¹ The goal of home visiting, as described by the CalWORKS Home Visiting Program is to "support positive health development and well-being outcomes for pregnant and parenting people, families, and infants born into poverty, expand their future educational, economic, and financial capability opportunities, and improve the likelihood that they will exit poverty." While existing research cites home visiting as an "evidence-based practice," very few of these studies centered parents' experiences and, specifically, the experiences of parents of color living in California.

Home visiting programs support structured visits by trained professionals to parents who are pregnant or have young children. The program components vary depending on the agency who is supporting the home visit, but may include health check-ups, screenings, referrals, parenting advice, and guidance with navigating programs and services in the community. In California, all 58 counties implement a home visiting program, with many implementing both of the following programs:

- **CalWORKs Home Visiting Program**. Under this program, most counties use one or a combination of the following models: Early Head Start, Nurse Family Partnership, Healthy Families America, or Parents as Teachers.
- **California Home Visiting Program** (funded through federal and state sources): Under this program, counties

¹ Peacock, S., Konrad, S., Watson, E., Nickel, D., & Muhajarine, N. (2013). Effectiveness of home visiting programs on Child outcomes: A systematic review. BMC Public Health, 13(1). https://doi.org/10.1186/1471-2458-13-17

muse use the Healthy Families America or Nurse Family Partnership model.²

Parent Voices recognizes that mothers living in California from a diversity of backgrounds have unique and important perspectives on what home visiting practices work best for them and that their voices are largely absent from research on home visiting. Parent Voices initiated this research out of a deep belief that recommendations derived from lived experiences are critical for shaping home visiting programs that align with the needs and values of California's diverse families. This report shares parents' experiences and recommendations to help fill a critical gap in practitioner and policymakers' knowledge on what mothers need from home visiting programs to support healthy and thriving families.

² Information for this section was sourced from: https://first5center.org/blog/home-visiting-landscape-in-california

Overview of Parent Focus Groups

During summer 2021, Parent Voices administered its first ever member survey. A component of this survey asked about parents' experiences with home visiting. Responses indicated that parents had mixed feelings about home visiting programs and that there was opportunity for services to better align with the needs of parents; specifically, over half of respondents rated their home visiting experience as "not helpful," "slightly helpful," or "moderately helpful." Following up from this survey, Parent Voices organized three focus groups of including 28 parents from different regions in California to delve deeper into their home visiting experiences to better understand what has worked and what could be improved. Two of these focus groups were conducted in English (14 total) and one was conducted in Spanish (14 total).

Of these 28 parents, 25 of them had direct experience with receiving home visiting services, one parent served as a home visiting case worker, and two parents had never received home visiting services. Parents had between one and six children. Of the parents that participated in home visiting, each had a participated for different lengths of time (mostly between six months and two years) and received services from various programs (e.g., hospital program, Nurse-Family Partnership,³ CalWORKS program, Black Infant Health Program).



Parents' varied experiences with home visiting led to a rich discussion around home visiting benefits and areas for growth and improvement. More specifically, the focus group touched on the following topics: (1) motivations for participating in home visiting; (2) positive experiences with home visiting; (3) challenges and missed opportunities with home visiting; and (4) recommendations for improving home visiting. Throughout the discussion, parents were candid with sharing their perspectives, leading to key themes and recommendations reflecting the lived experiences of parents as they navigated caring for their young children.

³ Participant referred to this program as the "Nurturing Partnership"

Motivations for Participating in Home Visiting

The focus group began with a conversation around why parents were interested in participating in home visiting. Overall, parents shared complementary motivations that centered on supporting the development of their newly born children and promoting positive life outcomes for themselves and their families.

Key Themes

Parents wanted to learn more about child development. One parent commented that she had parenting knowledge from what was passed down through her family, but this was not necessarily encompassing of medical knowledge that might be helpful for her child's development. Another parent remarked that she felt like there is always more to know about child development. Moreover, parents noted that each baby and each pregnancy is different, so it can be challenging to rely on past experiences for a new child.

Parents wanted someone to talk to as well as support their mental health. A few parents commented that they felt that they already knew a lot about child development and were not necessarily seeking support in that area. However, they were hoping to have someone to talk to in order to support their own well-being. Several parents candidly shared their experiences with post-partum depression and hoped that a home-visiting program would support them navigate through their recovery.

Parents felt like they needed help and support with caring for their newborn. One parent shared that she wanted support with learning how to bond with her child and expanding her knowledge of how to care for her child. This parent shared that it had been several years since she had cared for a newborn and hoped that the home visiting program could help her during this phase of motherhood. Two other parents shared that they were single mothers and did not have a lot of help from friends or family, so the home visiting program was an attractive option to receive additional support.

The hospital recommended additional support because their newborn had special needs. In one instance, a parent's child was born with a low birth weight. The hospital recommended that she participate in the home visiting program to help make sure that the child was gaining weight and had proper nutrition.

Positive Experiences with Home Visiting

The impact of the home visiting program varied across parents, but the majority parents shared that there was at least one aspect of the program that positively benefited themselves and/or their family. This section presents key themes describing parents' positive experiences with home visiting.

Key Themes

Parents' mental health and wellbeing were improved by the home visitor's presence. Consistent with previous findings on home visiting benefits,⁴ parents described that in addition to helping with child development, home visitors provided consistent support and encouragement for the parent that improved their mental health. In particular, one parent found that the home visitor's administration of the maternal depression scale was helpful for her to be able to talk about the challenges she was facing.

66

And then when my baby was in the hospital, I was going through... I suffered from another disorder along with the postpartum depression. And not to be able to bring my baby home was a big challenge for me. And she stuck with me through it. She would call me, she would talk to me. Refer me to different places. Like, "I think you should you go right here and get meds for your postpartum. I think you should do this, this, that, and that." And it helped me.

Parents developed meaningful and supportive relationships with home visitors, particularly when there was a shared cultural understanding. In one instance, the home visitor helped a parent with setting up her baby's crib and accompanied her to doctor's appointments. One parent shared that her home visitor

⁴ National Home Visiting Resource Center. (2021). *2021 Home Visiting Yearbook.* James Bell Associates and the Urban Institute. <u>https://nhvrc.org/yearbook/2021-yearbook/about-home-visiting/results/</u>

became like a best friend, as it was helpful to have someone to talk to outside of her family about her child's development. Moreover, this parent said that having a shared cultural background helped to create this strong bond. Similarly, parents that spoke Spanish shared that it was important for their home visitor to speak their home language and appreciated when their home visitor spoke Spanish and provided materials in Spanish. Parents felt that it was helpful to have an "unbiased third-party perspective," as well as a home visitor that approached the relationship as a partnership, as opposed to viewing the parent from a deficit lens. Another parent shared that having her home visitor support her during her birth was integral for developing a strong bond.



I have to say she was my best friend throughout those times, emotionally, mentally, physically. I wish that it was more of a family thing, but then I thought back and I was like, well it was intimate because I felt like I had someone aside from a mother or a sister-inlaw... Because even after a year... Both my son and I graduated from the program. I sent her a text, to, of course, her work phone, and she replied. And I just wanted to share how awesome my son was doing, how I was doing. And so that was just amazing.

Incentives provided to parents were welcomed and helpful. Parents were unanimous in their perspective around incentives being a supportive and motivating component of the home visiting program. For example, one parent shared that receiving pull-ups while their child was going through potty training was a great incentive for continuing with the home visiting program. Another parent shared that consistent incentives were integral to helping her stay focused on improving as a parent, improving her health, recovering from a nicotine addiction, and supporting her during a time of economic hardship.

Home visitors were accessible. Several parents shared that they were able to access their home visitor through calling, texting, and emailing at any hour of the day. This availability helped one parent feel supported and that there was somebody listening to them. Moreover, parents shared that home visitors would offer to meet at another location outside of the home if that was more convenient for the parent. Home visitors were flexible with shifting appointment times as needed. Another parent expressed that they appreciated that the home visitor would travel to them, as opposed to the parent needing to access public transportation to meet the home visitor at

another location, as this parent did not always feel comfortable taking her child on public transportation.

Parents deepened their knowledge of how to care for their children,

particularly children with special needs. One parent shared that they appreciated their home visitor's support with their child's speech delay. This parent felt comfortable with the assessment the home visitor administered with the child and the subsequent guidance that was given. Another parent shared that they received support from their home visitor on how to best accommodate their child's asthma condition. This home visitor offered several helpful tips and strategies to mitigate any asthma symptoms.

Parents appreciated the ease of signing up for home visiting. Some parents reported that signing up for home visiting was straightforward and not confusing. These parents said home visiting was an easy service to get, as opposed to other services such as Head Start or child care subsidies. One parent shared that her local special supplemental nutrition program for women, infants, and children (WIC) office supported her with signing up, and she felt supported with understanding how and when to sign up.

Parents were able to devote time to bond with their child. Parents appreciated that their home visitor created space for them to do an activity with their child and spend focused and quality time with their child, particularly if they had other demands on their time and focus (such as other children to care for). These opportunities helped parents to learn how to play and support their child's development, which was a positive outcome of home visiting.

I kind of already knew the stages and ages developmentally of the kids. And it was with my last, well, I don't know if it's my last, my fourth baby. So that was really like a breath refreshing thing to do [activities] with my little one. And it's time that I get to spend with him, doing different activities because the person comes with a little activity and you do the little activity with your kid.

Home visiting supported the parent's goals, in addition to their child's

development. For example, one parent shared that she received support with developing their business, financial planning, and home ownership. The home visitor supported the parent with identifying and working toward her personal and professional goals, in addition to supporting with her child's development.

Challenges and Missed Opportunities with Home Visiting

While several parents shared positive experiences with home visiting, parents also shared several critiques of the program and the challenges they faced during their participation. This section presents key themes related to the challenges parents experienced with their home visiting program.

Key Themes

Parents felt judged by home visitors. In one instance, a parent described that a home visitor was clearly judging her daughter, who was a teen mother. The home visitor was very dismissive toward her daughter and preferred to communicate with her mother (the parent focus group participant). Another parent shared that she was in a rehabilitation home at the time of her home visiting program and perceived judgement from her home visitor about her housing situation. Moreover, some of the monitoring conducted by the home visitors (e.g., parent weight, blood pressure, etc.) can feel unhelpful during times of stress and promote parents feeling judged by their home visitors.

My daughter was a teen mom. She had her daughter when she was 16. And the way that they spoke to her, and how they kind of dismissed her, and would rather talk to me, as the more parent-seeming person in the house, I think was really offensive. And so I was really hopeful that she would be able to find that person, who wasn't me, who would be able to provide that support and that guidance. But that's really not what happened, unfortunately.

Parents felt challenged with inviting home visitors into their home. Parents described how there can often be multiple people living in a relatively small space, making it hard to find a private place for home visiting. Moreover, inviting a stranger into their home can be stressful as it adds another layer of pressure and potential judgement. Parents felt the need to clean their home before the home visitor arrived and were challenged with finding time to do so given their already busy schedules. Given high costs and lack of affordable housing options, housing is a significant stressor

for many parents; needing to host a home visitor can be a turn-off for parents' participation in a home visiting program. Moreover, some parents have had negative experiences with child protective services (CPS) and are therefore uncomfortable with state employees entering their home for fear of negative repercussions from CPS.

I have always felt that I've lived in sub-standard housing. Right now I'm not in low-income housing. But we're five, six people in a two-bedroom apartment. And it's cluttered, and it's chaos, and... "Oh, well do you have a room where we could speak quietly?" "Hell, no. No, I don't. This is my life, right here." And so it was really hard for me to invite strangers into the worst parts of my life, during the most chaotic times of my life. And then they don't even know why they're there, and there's not really a place for them to sit, and there's not a clear table where they can write. And so, for me, it was really, really hard.

Some home visitors just "went through the checklist" as opposed to

centering the needs of the parent. Often, the information shared by the home visitor was not new for parents, as they had already learned most of the information from WIC meetings. Thus, the home visitor would simply go through a checklist of information that parents already knew and then did not offer any additional support. Moreover, some home visitors gave the impression that they did not know what to do beyond just going through the checklist. One parent also noted that her experience with home visiting during the pandemic (as opposed to pre-pandemic) has been less helpful and more like "checking things off a list" due to the virtual setting. Another parent shared that the virtual experience did not provide the depth of support they had hoped for.

And then, most of it, I felt like what they were sharing was... I already knew. I knew from participating in the WIC program and going to my WIC meetings. As [the other participant] was saying, they go through their checklist and say, again, "Do you have any questions?" And it's kind of like, "Well I really don't. You've covered what I already know, and if you're not sharing more information of things that I don't know about, then really what's the point of you coming?"

But when they got there, it was almost like they didn't even know why they were there. They went through their little checklist and then, "Okay, well do you have any questions?" And one of the things that you learn as an adult is you don't know what you don't know. So it was kind of like, "I don't know why you're here if you don't know why you're here."

Not all parents were able to connect with their home visitors. While a few parents shared that they developed a deep connection with their home visitor, others did not have that bond. Parents shared that some home visitors did not seem empathetic to parents' challenges or make an effort to get to know them.⁵ Moreover, parents perceived a power dynamic between themselves and the home visitor that made them feel uncomfortable and less likely to bond. One parent described how her home visitor could clearly see that she was struggling with her housing situation but did not offer any resources or helpful advice (as further detailed in the following quote).

⁵ Existing literature from the National Home Visiting Resource Center however, does name developing a strong relationship with the parent as a best practice: https://nhvrc.org/yearbook/2021yearbook/about-home-visiting/results/

I'm trying to learn to bond with my baby; how am I supposed to bond with another adult? I don't even know what's going on. Hospital births have always just been super traumatic. So yeah. And you guys keep talking about resources and free diapers... What? Nothing was ever offered, at all, in the realm. You see we are living on top of each other like rats, up in here. And no service was ever offered, other than, "And you know about WIC?" "Yeah, I know about WIC. I knew about that before you got here. Thanks for the help."

Connecting the home visiting program to the hospital can be problematic for some parents. A few parents shared how their hospital birthing experiences were traumatic. Therefore, having the home visitors come from the same hospitals associated with those traumatic experiences were challenging as the parent already had a damaged relationship with the hospital system.

I think that that, for me, was another piece. Was that, because my hospital births never went well, now you're sending in a [home visitor]. And so this [home visitor] is part of this larger system, who has now damaged that relationship prior to her ever coming to my house. And so I think that that sort of frames things differently, for my experience.

Some parents were challenged with understanding if home visiting was the right program for them. Best practices for home visiting state that caseworkers, nurses, and other staff introducing home visiting programs should take ample time to walk parents through the expectations, requirements, and benefits of the program.⁶ For

⁶ LBJ School of Public Affairs. (2018). Taking home visiting programs to scale in Texas: Lessons learned from implementation. Child and Family Research Partnership. https://childandfamilyresearch.utexas.edu/taking-home-visiting-programs-scale-texas-lessons-learnedimplementation

some parents in our focus groups, however, the home visiting program was not introduced or clearly defined for them, so they did not know if they were eligible. Moreover, some parents felt that there was not enough transparency when signing up for the program and they therefore did not know what to expect, when the program would start, or if they were going to be charged a fee. In some cases, parents were not offered anything through CalWORKs and had to directly ask about the resource in order to enroll (as opposed to the resource being proactively shared). Parents felt that if the program was proactively shared and explained more clearly, more families would enroll.

I just want to share. I think that I would've missed the opportunity, if I hadn't asked that WIC person. And I remember when she asked me, "What do you need?" And I asked her, "Well, what do you have in the community to offer me?" And when she started going down a list of things that her program she could remember, and she pulled out her county programs. She was sharing, "Oh, this program would be best if you want to learn about X, Y, and Z." And so I think I would've missed an opportunity if I hadn't asked. And I think sometimes that's where it happens. Where you miss some opportunities, because maybe they're just listening to what you need and not asking.

I was thinking because, I did the CalWORKs program, where you just get EBT and the Cash Aid. And I had different programs with that, and they helped me a lot as well. But I didn't know as far as, oh, I'm having a baby, they would help me with giving birth and all of those things. Because I didn't really have a lot of support at all when I had my son and stuff. So that would've been super nice for someone just to be there, to talk to and all those things.

Not all parents were provided with materials and services in the language of their choice. One parent that preferred to speak Spanish explained that the program sent a home visitor that did not speak Spanish and shared paperwork in English, without a Spanish language option. As a result, the parent and her home visitor experienced communication challenges that would have been overcome had the program provided a home visitor in the parent's preferred language.

Parent Recommendations for Improving Home Visiting

Building on the themes shared above, parents offered the following recommendations for improving home visiting programs.

Home Visiting Approach & Practices

1. Home visitors should approach home visiting by meeting parents where they are at, as opposed to going through a pre-defined checklist. This approach may mean refraining from taking a parent's vitals or offering to support the parent in other aspects of their lives (e.g., managing housework or relationships with others) as well as connecting them to other resources.

They took my weight, they took my blood pressure, they took my... They were checking to make sure that I was healthy, which is good, right? I guess when you come home from the hospital you should want that. But my baby wasn't home from the hospital, right? I was home from the hospital. So they're checking on me there. And then they're checking things that I didn't... I don't know. It was just a lot of stress at a time when I felt like I just needed somebody to be like, "Are you okay? Your baby's not home with you right now. Do you need anything? How can I help with that?" Right? And so that's what I needed. I didn't need to know what my blood pressure and weight was at that moment. "No, I've only lost five pounds." It's really irritating.

2. Provide other options to meet outside of the home. Home visitors should not assume that parents are comfortable with them coming to the home. Participating families may have a unique living situation that they aren't comfortable introducing to someone without established trust. Some parents may fear repercussions through CPS due to their unique living situation. Other locations such as a park, library, or café would make the program more comfortable and accessible for many families. Additionally, offering a virtual option for visits may be desirable for some parents as well.

3. Home visiting programs should provide a thorough orientation to the program. Parents shared that they would like more transparency and detailed information during the home visiting orientation. Without this strong understanding of the program and what to expect, some parents felt unnecessarily anxious about their first meeting with their home visitor. Having a stronger orientation would set up the parent and the home visitor for a smoother first visit.

> Not everybody has a home that is to their self. Not everybody is comfortable with people coming in their home. I agree with that. That would be a good suggestion as well, "Let's meet at a library, let's meet at a Starbucks. Let's meet..." You know what I mean? I think that was a great suggestion. Because not every time I wanted to meet at my home but, or make, because I can't say that, like I said, phone calls was a part of that. Make a phone call a part of that, ask them, make a Zoom call or something of that sort an option as well. Like, "Hey I'm busy right now." But since we're doing Zoom nowadays in this new era, they should implement that.

Timing of Home Visiting Services

4. Parents should have the option of the home visitor providing support prior the birth of the child and serving as an advocate during the birth. Parents recommended that the home visitor role be modeled after a doula's role, as that may lead to a stronger, more supportive home visitor/parent relationship.⁷

I made a phone call, and by the time she called me back, because it was towards the end of my pregnancy, I was in labor. And she came on down and she was an advocate. They only wanted to feed me ice chips. And she's like, "Well she needs to eat something. She's been here too long. What can we give her? Can we give her broth? Can we give her this?" She also happened to be a [home visitor] previously. When the nurses weren't doing what I wanted, she was my advocate. And she was totally there. And afterwards she gave me a couple phone calls. I never called back. Which I still regret just not saying, "Thank you." Because oh, my God, she was amazing. But I would've invited her into my home. "Look what we made together." You know what I mean? She was holding my hips and doing amazing things, to where my contraction pain went away. And I feel like that would've been a much stronger relationship, a much more comfortable relationship. She's already seen my insides on the outside, right? "You're not even worried about my house. You've seen the grossest things ever." And I think that that, for me, and probably for a lot of moms, would really release that barrier of, "What's she think of me?" You've seen me at my worst, and now you're going to help me be at my best.

⁷ This recommendation is also supported by the literature on home visiting: Sparr, M., & Ruben, J. (2018, May). Home visiting research and evaluation supported by the Maternal, Infant, and Early Childhood Home Visiting Program. National Home Visiting Resource Center Innovation Roundup Brief. Arlington, VA: James Bell Associates.

5. Extend the home visiting program so parents can have support when children are older. For some parents, this meant offering home visiting programs for when their child was elementary school-aged. For others, this meant extending home visiting until the age in which their child could do activities with the parent. In both contexts, parents recognized that different supports are needed at different stages of child development, and additional resources from a home visiting programs at those various ages and stages would be helpful.

I think people need home visiting at lots of different times in their life and what might not have been something that you cared about when your infant came home, maybe you want it when you have a two year old with behavior challenges or speech delays or whatever. I don't know. And then, again when they're five and again, when they're seven and again when they're 10 and again when they're 13, right? There's so many different times in parents' lives that home visiting would be super helpful.

Home Visitor Recruitment and Training

- 6. Ensure that home visitors are properly trained in anti-racism and trauma informed care in order to build meaningful relationships with families that are free of judgement. Parents suggested that the first step toward improving home visiting's connotation would be to reconsider calling it home visiting, as it negatively equates to child welfare home visits or subsidized housing visits. One parent suggested "life coaching" as a potential alternative. Moreover, training in anti-racism and trauma informed care may minimize the some of the judgement perceived by parents from their home visitor. ⁸
- **7.** Ensure cultural relevance and language accessibility when delivering services and providing materials. One way to do this may be hiring more home visitors with similar lived experiences, as well as prioritizing hiring home visitors with non-English language skills. While literature suggests that home visiting is best implemented when staff have formal training in social work, early childhood education, maternal and child health, and other related fields,⁹ parents recommend hiring and training former recipients of home visiting services who have experienced the program themselves and can provide unique consumer expertise (regardless of a degree or formal training).

And there's so many people out there who have lived experience, right? So, degrees are great, but also I wanted somebody who related to my experience and understood me in a different kind of way. That power dynamic was really challenging for me, right? I would've much rather had another mom come and just share resources and provide support and just be there to listen. To me, that's of more value, even if that person had a high school diploma and that was it.

⁸ This recommendation is aligned with parents' recommendations from this focus group, but they were drawn from previous discussions with Parent Voices parent leaders about their home visiting experiences and knowledge.

⁹ Brunner, W., & Pies, C.A. (2001). Intensive Home Visiting Programs : Implications for California Counties. <u>https://cchealth.org/public-health/pdf/home_visiting.pdf</u>

Home Visiting Resources

- **8.** All home visiting programs should provide incentives to families. Resources like diapers, wipes, toiletries, and books are helpful and appreciated by parents participating in home visiting programs.
- **9. Support families with any maternity-related paperwork.** As further highlighted in the following quote, parents would like help with disability and maternity leave paperwork, as these systems can be difficult to navigate.

All of the pregnancy, maternity leave, disability, whatever, whatever paperwork... That would've been helpful. Because I qualified for disability for a year after having my daughter, just because my postpartum depression was so bad. But the hoops that I had to jump through, between the EDD, and then the insurance, and then the doctors, and which doctor was going to write the letter versus... All of that was just insane, and it totally compounded everything that I was going through. So if they would have some training, and help on how to file that paperwork, or do the running around for you...

- **10. The home visiting program should help with connecting parents to supports for their physical and mental recovery.** To support with the variety of changes their bodies experience from childbirth, parents recommended that home visiting program encompass resources such as massages and chiropractic care, assessments for postpartum depression, and light housecleaning such as washing dishes and doing laundry.
- **11.** Home visitors should support parents with understanding their child's rights and their rights as a parent. This recommendation is particularly salient for parents of children with special needs who may need support with understanding how to advocate for their child.

Home Visiting Outreach and Coordination

12. Doctors and/or clinics should share information about the home visiting program when a parent becomes pregnant. Given that many parents may not know about home visiting programs, requiring home visiting information during prenatal appointments will help spread awareness of the service.

So it would be good that if you're having a baby, or if you're getting ready to have a baby, or so on and so far that there could be a program implemented into that system where, you know what I mean? You test pregnant and they're like, "Oh, do you need some assistance?" Break it down, have some literature, or have this program available for mothers that need it in some way.

- **13.** Publicize home visiting services in multiple locations to maximize the number of parents exposed to this opportunity. Home visiting should continue to be advertised through WIC and CalWORKs offices, as well as through resource and referral agencies, local elementary schools, and housing aurthorities.
- **14. Home visiting programs should coordinate with one another to minimize redundancy.** Parents shared that participating in multiple home visiting programs at one time can be overwhelming and potentially traumatizing for parents that do not wish to repeat sensitive information across multiple programs. Coordination across programs would help to ensure that parents are maximizing the benefits of home visiting while minimizing burden.

And I've definitely talked to other parents, I haven't experienced this personally, but I've certainly talked to other parents who they have a CalWORKs home visitor coming, they have a state preschool one for their other child, the foster care system, they have four home visitors and they're like, none of them talk to each other, none of them share information. Everybody's doing a separate thing. There's no coordination. And it feels redundant, but all these parents are desperate to have any

Supporting a Two-Generation Framework

Overall, parents' reflections and recommendations centered on building home visiting programs that support a two-generation framework. Several parents described how they felt ignored because there was not a recognition that healthy outcomes for babies were just as important as the health and well -being of the mother. For some, the visitor left the impression that they only cared about the baby's well-being. Moreover, some families had a newborn in addition to other children in the home. The needs of those children were also ignored. Parents recommend programs ask questions that address the emotional, mental, and physical needs of the mother and ask about supports needed for older children; or, at minimum, recognize how having older children is impacting their ability to meet their newborns needs. This approach supports a two-generation framework in which the needs of both the parents and their children are centered in a home visiting program.

I think just simply asking me about just how am I doing and what do I need? From delivering my child to coming home, what resources could I benefit from? Not just coming in, taking the weight of my child, asking me what they're eating, or how much milk they're eating. Asking me, am I okay after my birth went completely right when it was supposed to go straight. I expected to have a regular delivery and I go into emergency C-section. And so just that whole experience. Just asking more questions about just me. Me becoming a mom to another child. I guess, just ask me more questions about me. I don't necessarily know what questions I want them to ask me, but just asking more questions about me. What do I need, as a parent?

