



# Building A National R&D Platform for Precision Home Visiting

Website: hvresearch.org

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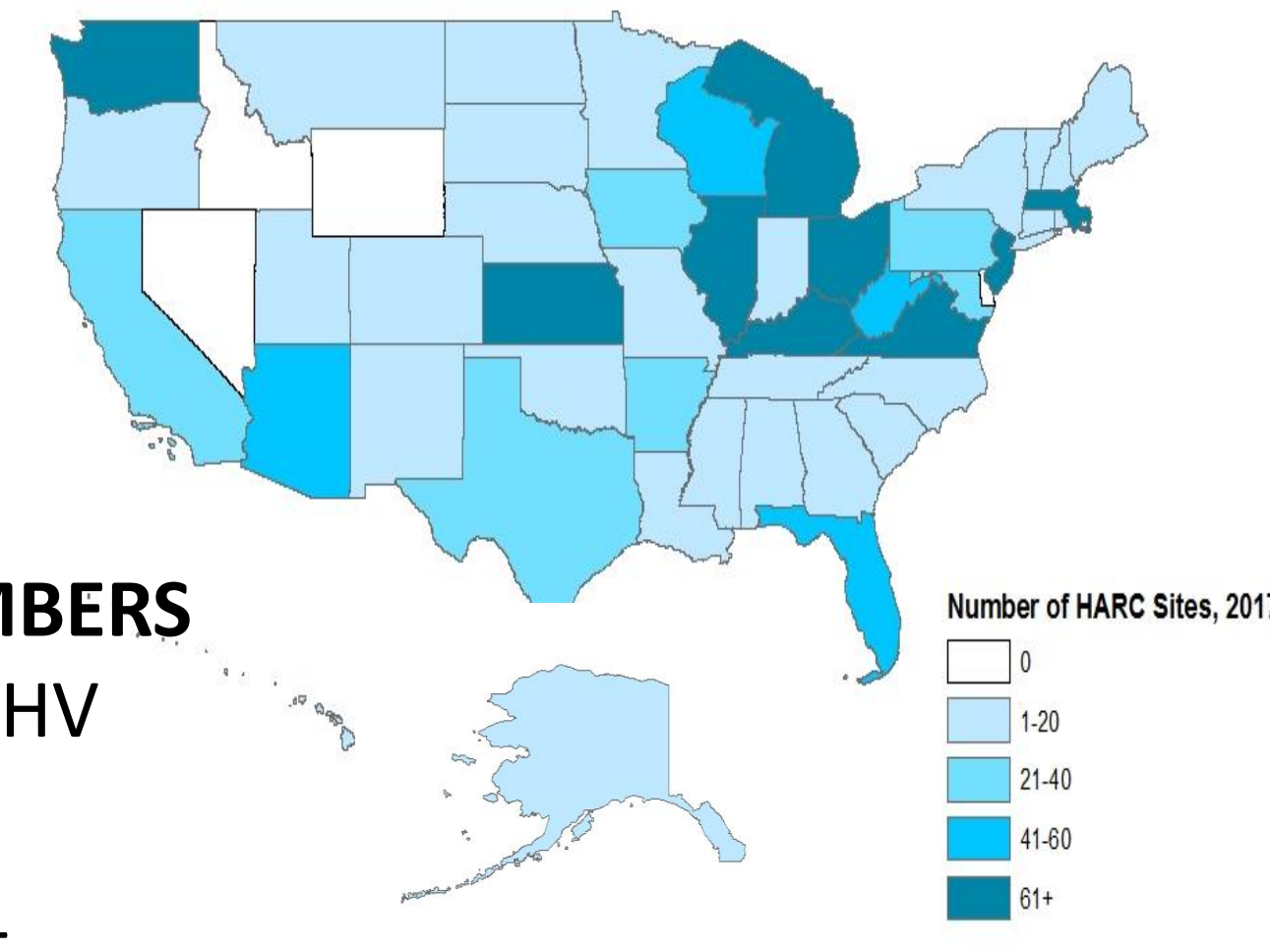
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## BACKGROUND

- The US is taking evidence-based early home visiting (HV) to scale.
- Programs target expectant families and families with young children.
- Programs are expected to improve a broad range of outcomes.
- Nearly 20 models have been designated as evidence-based.
- Federal investment expands HV availability, builds infrastructure to promote service quality and coordination, AND supports research to advance the field.
- HARC is a critical part of US infrastructure for HV research and development.



## OBJECTIVE 1 Build a National Network of HV Stakeholders



- HARC MEMBERS**
- >800 Local HV programs
  - 48 States, 1 Territory and 8 Tribal Organizations
  - 9 Evidence-based HV Models

## OBJECTIVE 2 Develop a National Stakeholder-Driven HV Research Agenda

- RESEARCH AGENDA PRIORITIES**  
Distilled from nearly 4000 research questions nominated by nearly 1700 stakeholders nationally
- Strengthen and broaden HV effectiveness
  - Identify core elements
  - Promote successful adoption
  - Promote successful adaptation
  - Promote fidelity
  - Build a competent workforce
  - Promote family engagement
  - Promote coordination with other services
  - Promote sustainment of effective HV
  - Build research infrastructure

## OBJECTIVE 3 Accelerate the Use of Innovative R&D Principles to Achieve Precision HV By Building Stakeholder *Awareness* and *Capacity* – the Can Do and Will Do for Such Research

### WHAT IS PRECISION HV?

### WHY DO WE NEED PRECISION HV?

### HOW DO HARC’S R&D PRINCIPLES COMPARE WITH TRADITIONAL APPROACHES?

### HOW DOES HARC BUILD ‘CAN DO’ AND ‘WILL DO’?

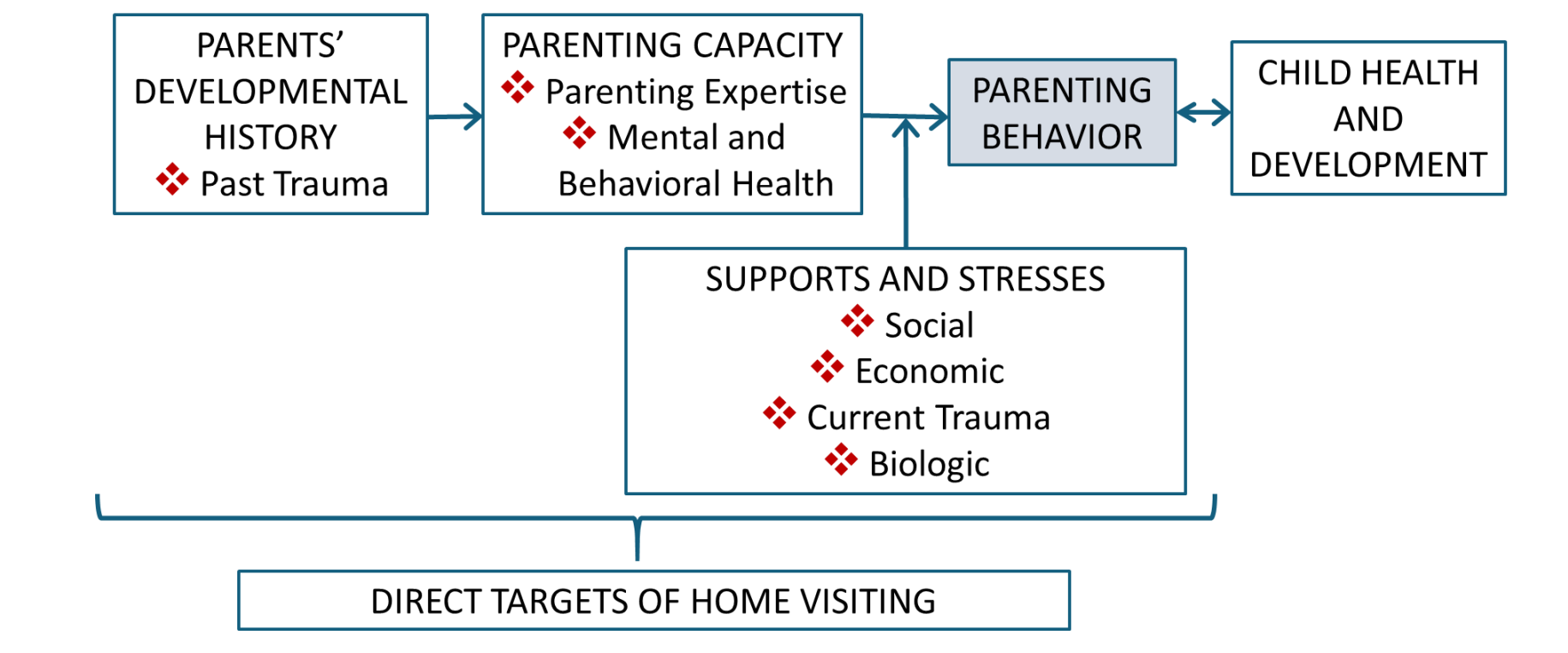
- Explicit active ingredients of HV tailored to specific family attributes, in alignment with what works best, for whom, to broaden and strengthen impacts

#### 1. Average HV impacts are mixed and, overall, small.

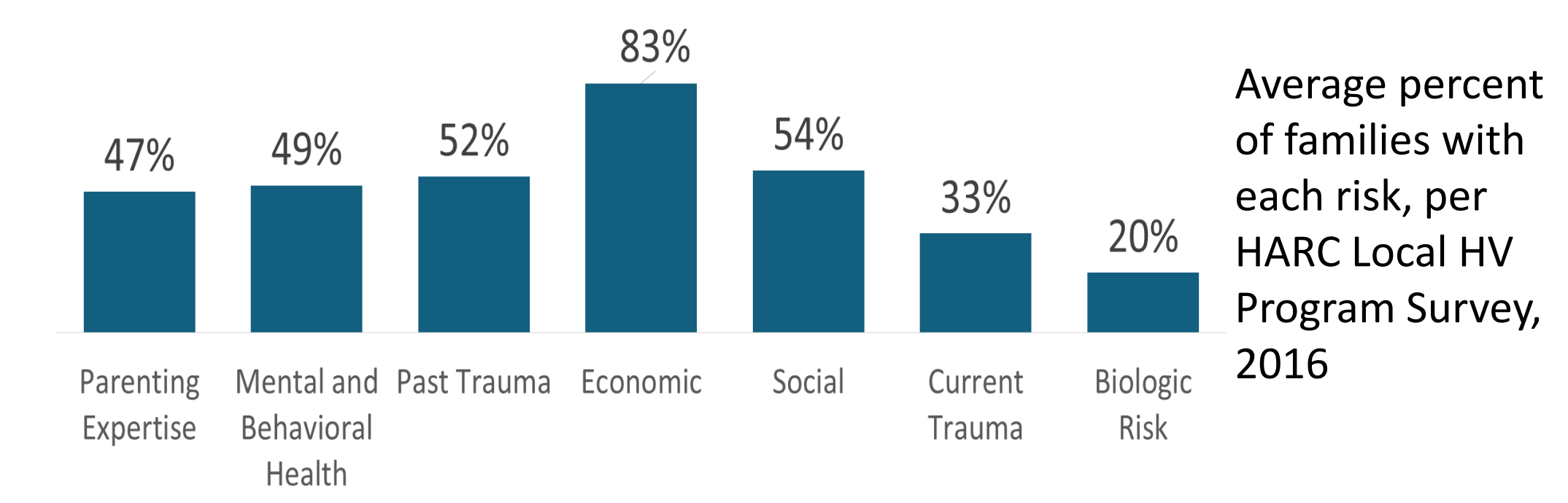
	Range	Average	# of Effects
Positive parenting practices	-0.36 to 0.49	0.03	40
Child maltreatment	-0.45 to 0.30	-0.03	14
Child health	-0.50 to 0.43	0.08	24
Child development	-0.14 to 0.34	0.06	26
Maternal health	-0.34 to 0.80	0.17	13
Referrals and coordination	-0.62 to 0.67	0.14	18

<sup>1</sup>Source: Design Options for Home Visiting Evaluation Project

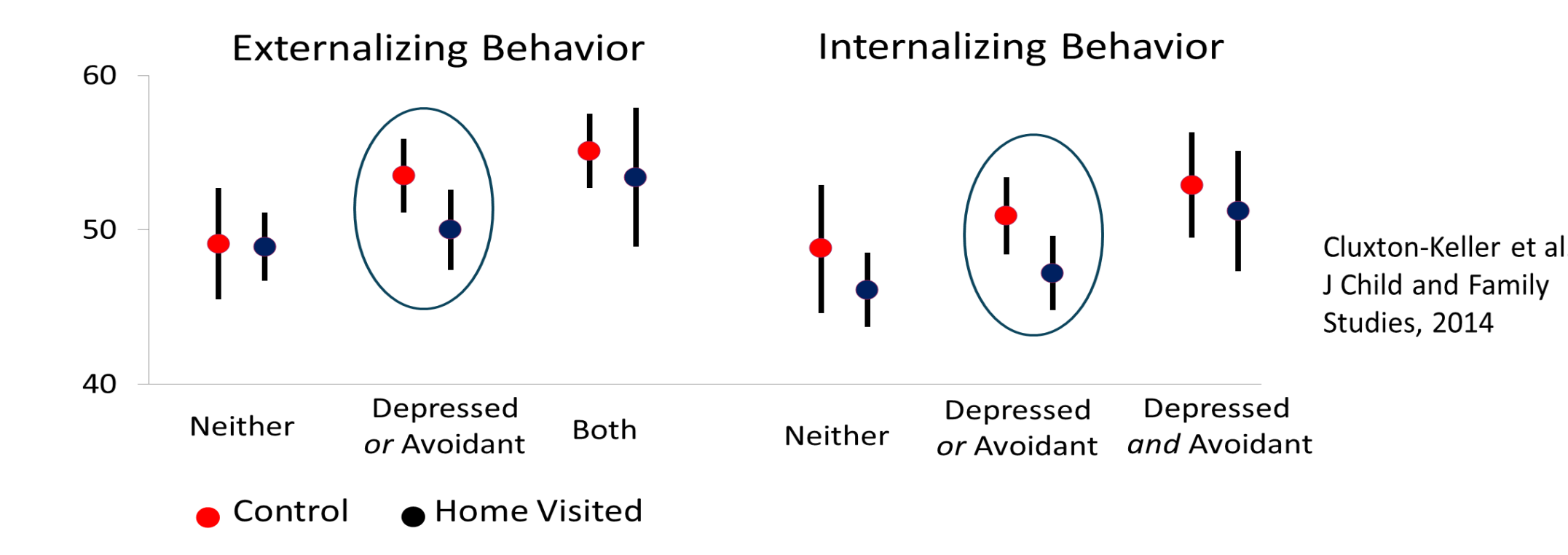
#### 2. Factors on many pathways influence parenting



#### 3. Families in HV face risks on multiple, varied pathways.



#### 4. Impacts vary across sub-groups in theoretically meaningful ways.



## HARC’S ROLE

To strengthen and broaden HV impact through innovative research to achieve precision HV

	R&D PRINCIPLES	TRADITIONAL
<b>COLLABORATION</b>	• True partnership across stakeholder groups in creation, testing, translation	• Researcher or practitioner • Sector-specific • HV-specific
<b>LEVEL OF DETAIL</b>	• Active ingredients • Fully specified pathways • All components measured	• Complex interventions • Broadly defined
<b>RESEARCH DESIGNS</b>	• Designed to test what works, for whom • Rapid, iterative	• RCTs • Average effects • Post hoc sub-group tests?
<b>FOCUS</b>	• Meaningful aspects of operations, micro- to macro	• Easily measured aspects of program operations

- Training and TA tailored to stakeholders’ interests and needs
- Seed funding for intervention design
- Comprehensive dissemination strategies to translate results to policy
- Facilitation of multi-site research
- Learning collaboratives for research in key substantive areas

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