

Virtually the Same?

Virtual Home Visits in Response to COVID-19



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The COVID-19 pandemic compelled home visitors to transition rapidly from in-person to virtual contact with families. The field had to adapt to changing circumstances brought about by both social distancing and rapidly shifting needs of families. Many aspects of program services previously taken for granted were no longer viable. Home visitors could not go into the home to assess child or family functioning, bring materials or handouts, or engage in the more familiar elements of interpersonal communication that comes with in-person contact. As community resources became less accessible, home visitors' role in linking families with needed services became more challenging, even as family needs increased.

Many home visiting programs quickly shifted to virtual visiting as an alternative method of connecting with families.¹ On top of the enormous technical and logistical issues, there was little information on what works best, for which families, when connecting virtually. For home visiting to be successful in truly reaching families through virtual visits—to offer education and support aligned with families' preferences and to be effective in building family assets and reducing risks—we need to better understand how visitors virtually interact with families and respond to changing needs, and to consider how these innovations will inform the field even after COVID restrictions are lifted.

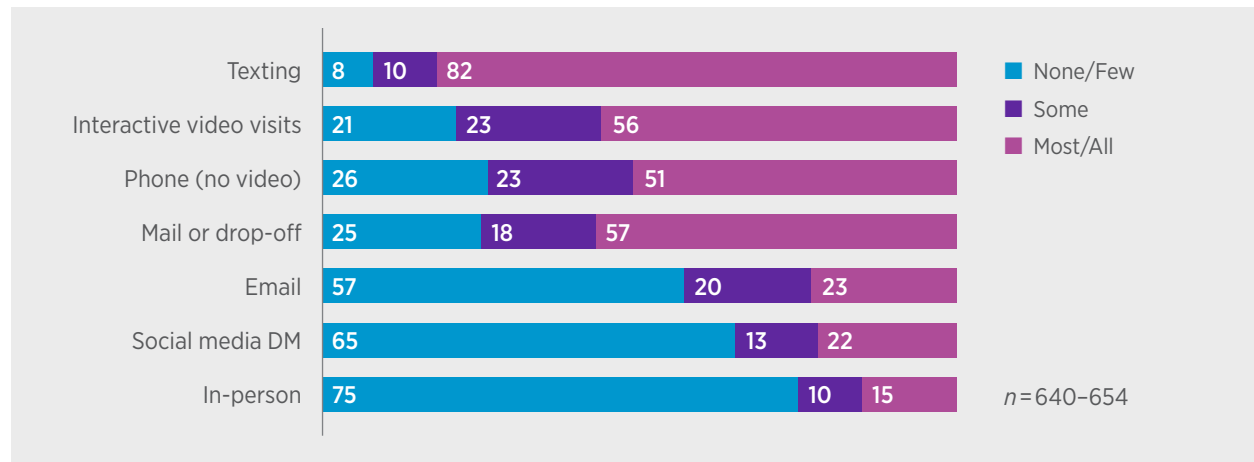
This brief presents findings from a survey of 658 home visitors across the United States representing multiple models, geographic regions, and communities, about their shift to virtual home visiting because of the COVID-19 pandemic, with an emphasis on how home visitors work with families using interactive video visits. The survey is part of a larger study conducted by Erikson Institute and the Home Visiting Applied Research Collaborative (HARC), which also included observing recorded virtual home visits and interviewing home visitors and caregivers from those visits.²

Contact with Families

Home visitors reported using multiple methods to stay in contact with families on their caseload, including interactive video visits, calls, texting and, to a lesser extent, emails and social media.

- At the time of this survey (September 2020), visitors reported doing primarily virtual contacts, although 25% reported doing some or more in-person visits in the past month.

Connecting with Families



- Poor internet connections remained an issue for many families, with over half of home visitors (57%; not shown) reporting it to be a problem for some to all of their families.

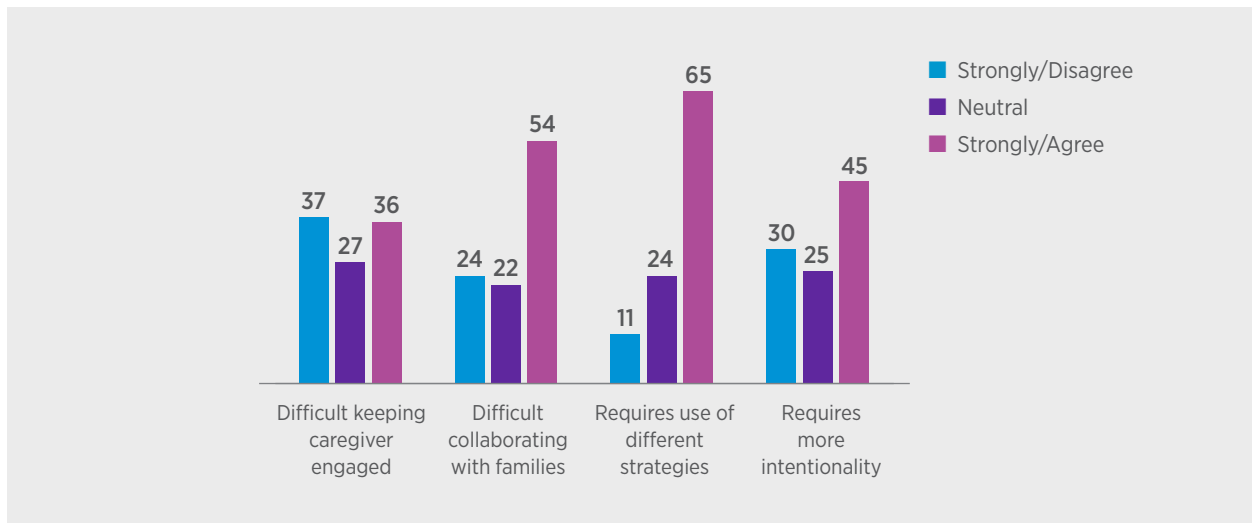
“Some families are more engaged and other families are less consistent. It all depends on the factors the family is facing due to COVID-19. This has made work challenging.”

—Home visitor, commenting at the end of the survey

Engagement with Families

- Home visitors reported that although they did not find it challenging to keep caregivers engaged, they did overall find collaborating with families more difficult with virtual visits.
- Almost two-thirds of home visitors agreed that virtual visits require use of different strategies than in-person and 45% agreed that it required more intentionality on their part.

Virtual Visit Engagement



n=498. Only home visitors indicating that they used interactive video visits to conduct remote sessions were asked to respond to these items.

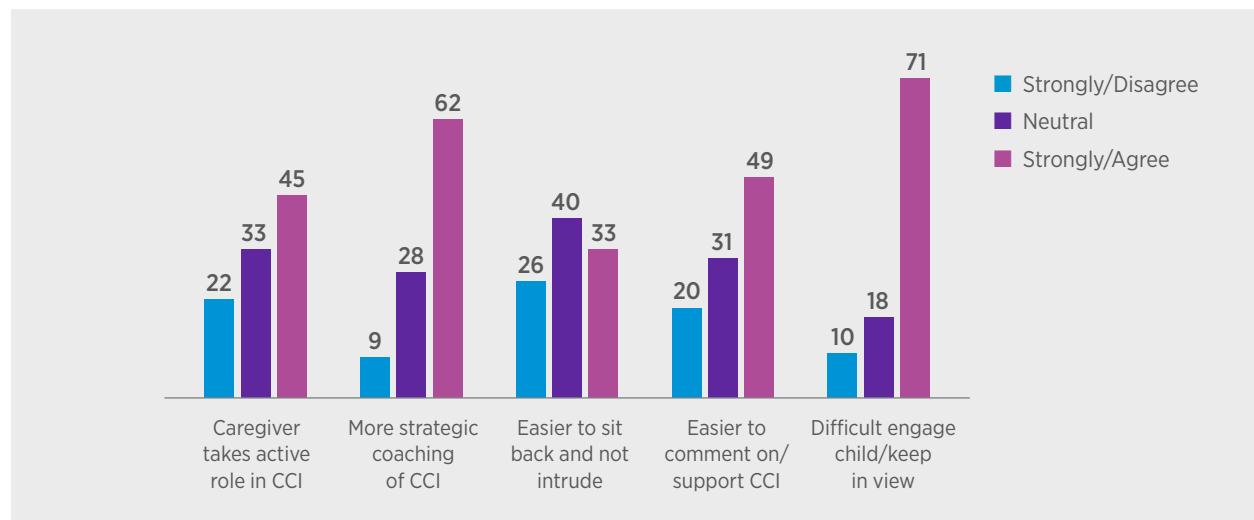
Content of Virtual Video Visits

- Despite the need to use different strategies, many home visitors (55%) agreed or strongly agreed to the statement that the content of virtual visits was similar to in-person visits.
- Relatively few home visitors (23%) endorsed the view that it was a struggle to move families out of crisis mode, a concern often noted earlier during the pandemic.³
- Eight out of ten of the home visitors surveyed noted that most or all of their visits covered caregiving and child development.
- Over half (59%) reported that most or all of their visits include some kind of caregiver-child activity.

Given the emphasis on caregiver-child interaction in many home visiting program models,⁴ we asked specifically about how home visitors engage and encourage these activities in virtual visits.

- Most home visitors (71%) responded that it is difficult to engage children and keep them in view during visits. Almost half (49%; not shown) also reported that the caregiver was more difficult to see in these visits.
- Despite these challenges, about half (49%) still agreed or strongly agreed that virtual visits made it easier to comment on or support parent-child interactions.
- 62% of home visitors agreed or strongly agreed that they needed to use more strategic coaching of caregiver-child interaction during visits and 45% agreed or strongly agreed that virtual video visits encourage the caregiver to take a more active role in these activities.

Caregiver Child Interaction



n=498. Only home visitors indicating that they used interactive video visits to conduct remote sessions were asked to respond to these items.

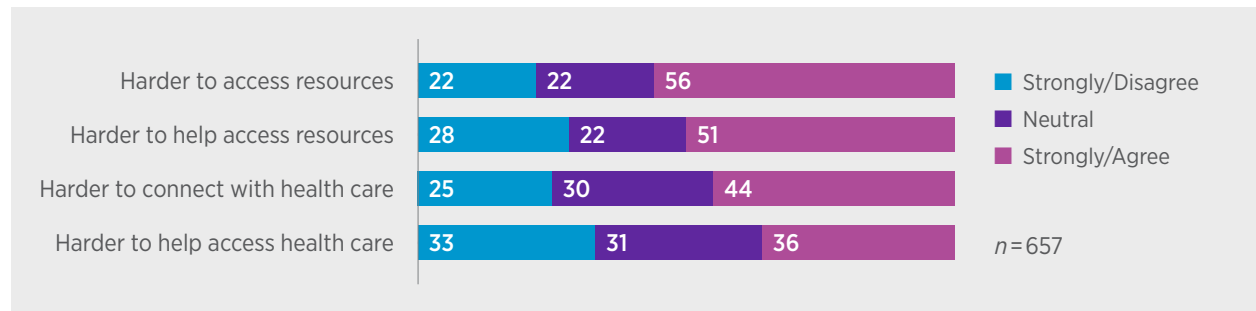
“Being creative is important in using virtual visits. I have to be resourceful to keep the parent-child engagement during the virtual visit.”

—Home visitor, commenting at the end of the survey

Community Service Access

- Although almost two-thirds (63%; not shown) reported most or all of their virtual visits included referrals to community services, they also reported that families struggle to access these services and it was harder to help families access the services.
- Home visitors reported somewhat less difficulty with family health care access.

Accessing Community Services

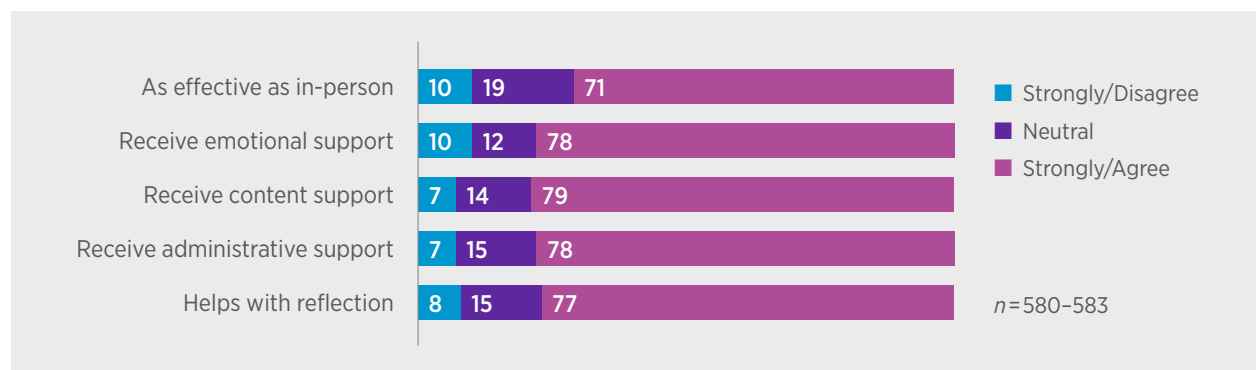


Supervision

Home visitors reported getting regular supervision during the pandemic.

- 84% received individual supervision, either by itself or in conjunction with group supervision. Almost all of it (92%) was conducted virtually (either phone or video)
- Home visitors rated their virtual supervision highly. Across different questions rated on a 5-point scale (from strongly disagree to strongly agree), home visitors endorsed positive statements about receiving administrative, emotional, and content support from supervision. They largely agreed that it was as effective as in-person supervision and was helpful for their own reflection.

Quality of Virtual Supervision



- There was little observation of virtual home visits by supervisors. Only a third of home visitors (34%) indicated that their supervisor had observed them in practice.
- Few home visitors (18%) reported making recordings of virtual visits to allow observation of their own practice by themselves or others.

Home Visitor Well-Being

We asked a series of questions about the stress level of home visitors and the extent to which they still found their jobs to be satisfying. We focused on home visitor burn-out, job stress, concerns about returning to full-time in-person work, and personal stress related to COVID. We also asked questions focused on positive aspects of work. Questions were rated on a 5-point scale and items were summarized as part of larger constructs.

- Although there was variation, home visitors on average did *not* report significant amounts of stress or burnout. They maintained positive feelings about their work.

Home Visitor Stress and Well-being

	Mean
Positive feelings about work ^a	3.80
Burnout ^a	3.03
Job stress ^b	2.78
Return to work stress ^b	2.89
Personal stress over COVID-19 ^b	2.69

n = 654; a. Rated from Strongly Disagree to Strongly Agree; b. Rated from Not at all to Very Concerned

- Over a quarter of home visitors reported that people close to them had been affected by COVID-19 and about one out of 10 home visitors had time off of work because of COVID-19.

Personal Impact of COVID-19

Home visitors answering yes	N	Percent
Has anyone close to you been affected by COVID-19? ^a	187	28.5
Have you taken time off work because of COVID 19? ^b	71	10.8

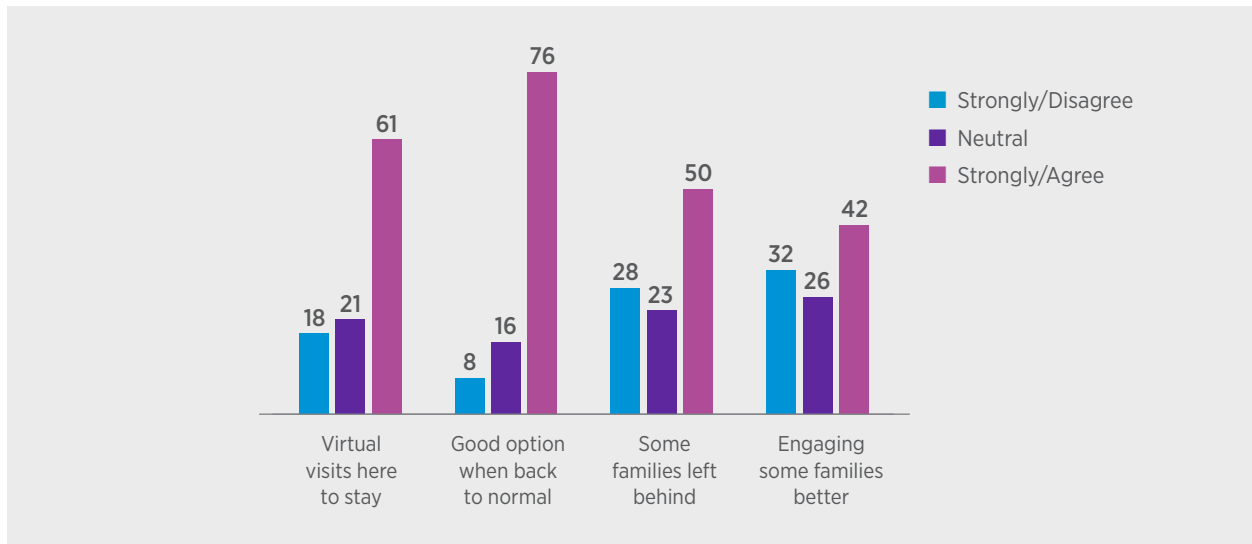
n = 657; a. 28 (4.2%) did not answer; b. 11 (1.8%) did not answer

Future of Home Visiting

We asked home visitors their opinions about the future of virtual home visiting.

- Many (61%) agreed that virtual visits are “here to stay” even after the COVID-19 crisis is resolved, and over three quarters (76%) agreed or strongly agreed that virtual home visits are a good option to connect with families even if in-person visits go “back to normal.”

Future of Virtual Visits



n=658

Despite this endorsement, most also agreed that some families fare better with virtual visits than others.

- Half agreed that some families are being left behind by the nature of virtual visits, while 42% agreed or strongly agreed that they can engage some families better than others during virtual visits.

Finally, home visitors were asked to estimate the percentage of visits they would prefer to conduct via phone, virtual visit and in-person formats going forward. While home visitors, on average, noted that they preferred to conduct over half of visits in-person (58%), they did see virtual and phone visits as having a substantial place in their visit schedule in the future.

I would like future visits to be	Average Percentage
Phone	14.70
Virtual	27.42
In-Person	57.89

n=658

Conclusions

By September 2020, home visitors were using multiple means to connect with families and largely succeeding, even though many families still struggled with stable internet six months into the pandemic period. Overall, home visitors did not report dramatic differences in virtual home visits from their work before the pandemic. Families still engaged with home visitors. Content was reported as similar to what was provided before. Visits still largely emphasized child development and caregiving guidance and there was an ongoing emphasis on referrals to community services.

There were certainly differences in these virtual services versus the home visitor's previous experiences in-person. Home visitors noted a greater emphasis in coaching and in caregivers taking a larger role in activities with their children, who themselves were harder to engage on virtual screens. It is possible that this greater coaching emphasis is a hidden benefit of virtual visits, as home visitors must be more hands-off and keep the parents more hands-on.

Despite the larger context of the pandemic and the hardship that most people have felt during this international crisis, home visitors at the time of this survey still reported positive feelings about their work and did not show strongly elevated levels of stress. It is also possible that the timing of this survey, at the end of summer and before the beginning of many "second waves" of COVID transmission, contributed to these findings. Home visitors continued to get regular supervision, which may have also been helpful.

Notably, however, this supervision did not involve observation of home visitor practice. Nor did home visitors take advantage of the relative ease of recording interactive video visits to observe their own practice. Given the ongoing question of how different virtual practice is from in-person, this is important. How do we define skilled use of virtual techniques, and what supports do home visitors need to use these techniques skillfully? Other parts of our study, which involve virtual home visit recordings, will unpack these and other questions of home visitor practice.

Home visitors agreed virtual visits are here to stay even post-pandemic. Home visitors wanted the option of virtual home visits even as they wanted the majority of their work to be in-person. Home visitors also noted concern that some families were being left behind in the shift to virtual visits. The challenge for the field is how to use the innovations that have been developed in the past year to increase access to services while still ensuring that these innovations are used effectively for the families who most need it.

"I believe that virtual visits are a great option and should continue to be an option, but I think in-home visits are best for most families."

—Home visitor, commenting at the end of the survey

Methods

This survey was conducted online 09/10/2020 to 10/09/2020. Home visitors were recruited from programs that had initially responded to a brief HARC survey and expressed willingness for additional research participation.

- **The final sample was 658 home visitors, representing 170 programs and 24 different program models,** with the majority (79%) from the four largest models: Parents as Teachers, Healthy Families America, Early Head Start, and Nurse Family Partnership.
- Respondents came from 42 different states (and DC), and served families who lived in urban (46%), rural (62%), and suburban areas (45%)
- Respondents and families they served were distributed across different racial/ethnic groups (see Table).
- On average, 28% of their caseload was enrolled after onset of the COVID-19 pandemic.
- Home visitors averaged 40.5 years of age and worked as home visitors an average of 6.5 years. Over three-quarters (76%) had a bachelor's degree or higher.
- Due to time and logistical constraints, the survey was only in English, although approximately 24% of respondents reported speaking another language during home visits (mostly Spanish).

These sample characteristics closely mirrored those of other national home visiting studies (see full report for details).

	Home Visitors	Families in Caseload
Race/Ethnicity Languages¹	<i>Percentage</i>	<i>Percentage</i>
American Indian	4.5	17.3
Asian/Pacific Islander	1.5	21.9
Black/African American	17.7	64.4
Hispanic/Latinx	18.3	62.1
White, non-Hispanic	59.4	79.8
Other	1.5	7.1
<i>Two or more noted</i>	4.3	76.0

	Percentage	Percentage
Languages¹		
English	98.7	92.9
Spanish	19.8	50.6
Other	3.6	24.0
<i>Two or more languages</i>	19.5	67.7

1. For home visitors, language spoken in home visits

Survey questions were designed after review of different reference sources for content and was piloted with ten home visitors in five programs across four states, who also provided feedback. Questions on the survey covered mode of service delivery, content of visits, family engagement, attitudes and beliefs towards conducting virtual home visits, supervision and professional development, and level of stress and work satisfaction. Most required respondents to rate statements on a 5-point scale (e.g., strongly disagree to strongly agree). In some cases factor analysis was used as a means of data reduction, with items summed to form constructs based on results of the analyses. Home visitors were asked to provide any additional comments at the end of the survey.

Endnotes

- 1 O'Neill K., Korfmacher, J., Zagaja, C., and Duggan, A., for the Home Visiting Applied Research Collaborative. (April 10, 2020). COVID-19's early impact on home visiting. First report from a national HARC-beat survey of local home visiting programs. Available at <https://www.hvresearch.org/wp-content/uploads/2020/04/COVID-19s-Early-Impact-on-Home-Visiting.pdf>
- 2 Findings from those observations and interviews will be presented in a separate brief. A full report detailing the entire project, including additional survey findings not reported here, will be available on the Erikson Institute and HARC websites.
- 3 O'Neill et al., 2020
- 4 Avellar, S. A., & Supplee, L. H. (2013). Effectiveness of home visiting in improving child health and reducing child maltreatment. *Pediatrics*, 132(Supplement 2), S90–S99. <https://doi.org/10.1542/peds.2013-1021G>

Acknowledgments

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