

First 5 San Joaquin
**Home Visiting
Initiative
Newsletter**



Executive Summary

First 5 San Joaquin (F5SJ) invests in home visiting - an evidence-based strategy for strengthening family resiliency and supporting children so they are healthy and ready for school - including funding organizations who have the capacity and expertise to reach and effectively engage historically underserved communities. Several different home visiting programs are offered by F5SJ including:

- **Home Visitation Initiative** focuses on preparing children for school, strengthening parent knowledge of child development, assisting parents to make healthy lifestyle changes, and providing opportunities for connections with other parents.
- **FamilyWORKs** provides services to California Work Opportunity Responsibility to Kids (CalWORKs) families with children ages 0 to 5. In addition to home visits focused on child development, FamilyWORKs participants receive job search and job readiness assistance.
- **JourneyWORKs** provides services for families with children ages 0 to 5 receiving CalWORKs public assistance and who are either at risk for or experiencing substance use or mental health challenges.

Last year these home visiting programs served 1,064 parents; nearly all were from historically underserved racial or ethnic communities. As a result of their participation, parents reported being more knowledgeable and resilient and children were better prepared for school both socially and academically.

Key recommendations from this evaluation are summarized in the table below.

Recommendations

- Continue to invest in training to strengthen the home visiting workforce.
- Consider expanding opportunities for contractors to meet more regularly.
- Continue to prioritize in person home visiting services.
- Engage contractors in discussions about how to increase and track father engagement.
- Explore the provision of additional family engagement activities.

Background

For over 20 years, First 5 San Joaquin (F5SJ) has invested in home visiting as a strategy to help ensure children enter school healthy and ready to learn. Funded organizations (“contractors”) provide individualized support and service coordination to families with children ages 0 to 5. Services are provided in the home or another safe, accessible location by trained and trusted community messengers. F5SJ’s investment in home visiting is part of a broader strategy to achieve equity. This approach involves funding organizations who have the capacity and expertise to reach and effectively engage historically underserved communities such as individuals who identify as Black, Indigenous, or People of Color and/or who live in under-resourced or historically marginalized communities. As described below, F5SJ offers several distinct home visiting programs, each responding to the specific needs and circumstances of families with children ages 0 to 5.¹

- **Home Visitation Initiative (HVI)** provides services to families with children ages 0 to 5 focusing on preparing children for school, strengthening parent knowledge of child development, assisting parents to make healthy lifestyle changes through good nutrition and regular physical activity, and providing opportunities for connections with other parents through supportive group meetings and community resources. Contractors funded under HVI offer two evidence-based home visitation programs: Parents as Teachers (PAT)² and University of California Cooperative Extension (UCCE)³ Health Education.
- **FamilyWORKs** provides services to California Work Opportunity Responsibility to Kids (CalWORKs) families with children ages 0 to 5. In addition to receiving PAT, FamilyWORKs participants also receive job search and job readiness assistance to help them obtain employment and achieve economic self-sufficiency.
- **JourneyWORKs** provides services for families with children ages 0 to 5 receiving CalWORKs public assistance and who are either at risk for or experiencing substance use or mental health challenges. Home visitors support parent access to substance use and/or behavioral health services.

This evaluation report documents implementation and impacts across home visiting programs for F5SJ contractors and participants during the 2022-2023 fiscal year. The purpose of this report was to collect data to better understand the strategies home visiting programs used to reach their priority populations, how priority populations experienced the programs, as well as how program experiences can be enhanced for priority populations. Findings were informed by surveys, interviews, and the Client and Service Database. For a full description of evaluation methods, please refer to the Technical Appendix.

Home visiting programs are serving their priority populations.

During interviews, contractors shared specific priority populations they aim to reach. This included families from historically underserved racial and ethnic communities, as well as families who are low-income, living in under-resourced

Home Visiting Contractors

HVI: Asian Pacific Self-Development And Residential Association, California Health Collaborative, Child Abuse Prevention Council, Delta Health Care and Management Services Corporation, El Concilio California, Family Resource Center, Lincoln Unified School District, San Joaquin County Office of Education, and YMCA of San Joaquin County.

FamilyWORKs: Child Abuse Prevention Council, El Concilio California, Family Resource Center, Mary Magdalene Community Services, and San Joaquin County Office of Education.

JourneyWORKs: Child Abuse Prevention

¹ F5SJ also invests in a home visitation initiative that aims to enhance the quality of care provided by grandparents. The data collected from this initiative will be provided in a newsletter later this year.

² Families with children ages 0 to 3 are eligible to participate in PAT and receive weekly visits for up to 12 months.

³ UCCE Health Education includes curricula focused on nutrition, family finances, and early literacy. Families with children ages 0 to 5 are eligible to participate and receive weekly visits for up to six months.

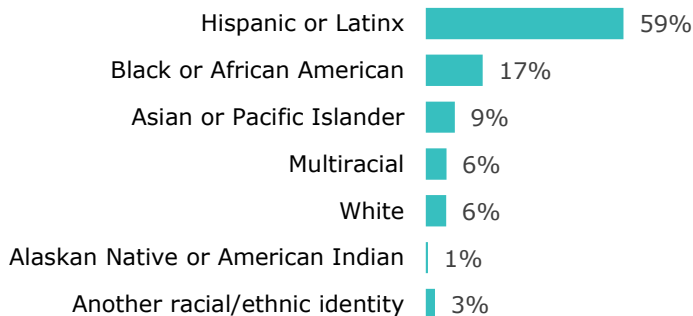
areas, have children with special needs, are CalWORKs recipients, and those at risk of substance abuse, homelessness, or mental health challenges. Contractors made data informed decisions to identify their priority populations, including collaborating with other agencies to better understand needs and disparities, reviewing secondary indicator data, and relying on their own experience and expertise serving the community.

Data collected from the Client and Service databases⁴ show home visiting programs provided services to those they intended to reach.

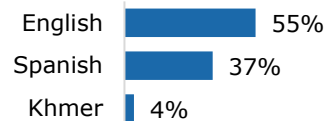
- Nearly all (94%) participants were from a historically underserved racial or ethnic community⁵, including 98 percent of HVI participants, 91 percent of FamilyWORKs, and 79 percent of JourneyWORKs.
- The primary languages spoken included English (55%), Spanish (37%), and Khmer (4%).
- Nearly two-thirds of families (63%) reported making less than \$32,000 per year.⁶
- The greatest number of participants lived in 95206 (14%), 95207 (10%), 95205 (9%), 95210 (8%), and 95240 (8%) – zip codes that include many of the census tracts that have been identified as areas where communities experience the greatest health disparities.⁷

F5SJ home visiting programs reached **1,064 parents** and **1,226 children ages 0 to 5** in FY 2022-2023. On average, parents participated in home visiting for **one year**.

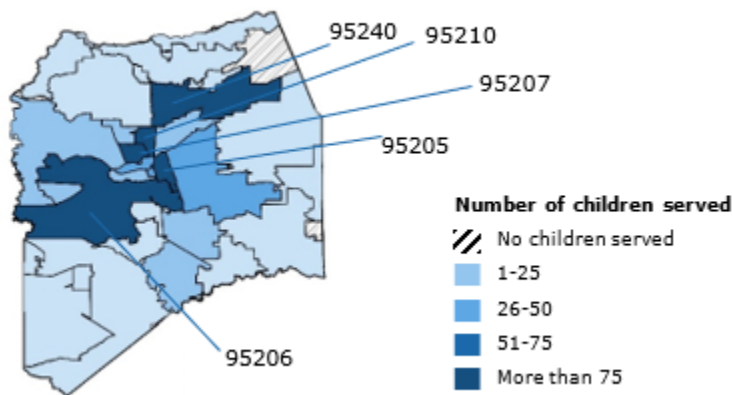
Race/ethnicity



Primary languages spoken



Geography



Income



63% of families reported **making less than \$32,000** per year

⁴ Race/ethnicity, language, and zip code data represent available data for participating children. Percentages may not add to 100 due to rounding.

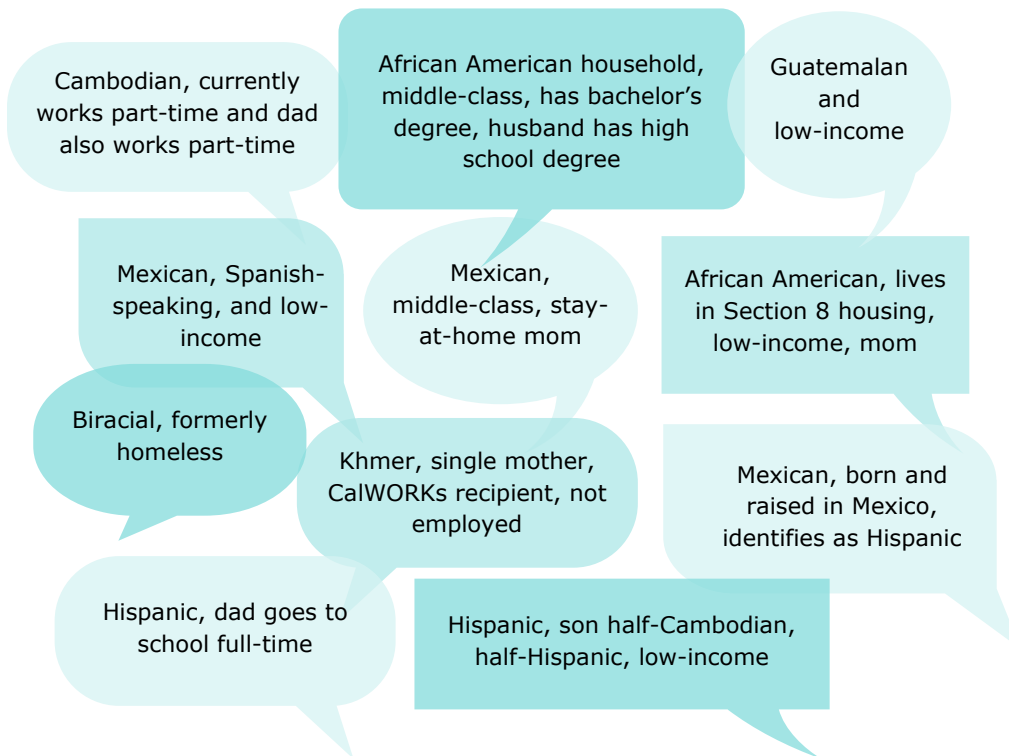
⁵ Historically underserved racial and ethnic communities include Hispanic/Latinx, Black/African American, Asian/Pacific Islander, Multiracial, Alaskan Native/American Indian, and another racial/ethnic identity.

⁶ Income data was only available for HVI and FamilyWORKs families.

⁷ Community Health Improvement Plan for San Joaquin County.

https://www.sicphs.org/assets/20220817_CHIP%20Report%207%2025%2022.pdf. Accessed on February 28, 2024.

Interviews with participants further demonstrated home visiting programs are reaching priority populations. Participants described themselves as having intersecting identities including those that have historically been underserved.



Contractors used creative and culturally relevant strategies to engage their priority populations, though some barriers made outreach and participation challenging.

Contractors used a range of strategies to enroll priority communities in their home visiting programs including:



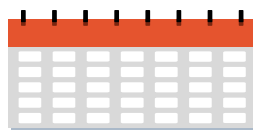
Leveraging positive word of mouth within the community.



Going to locations where priority populations frequently visit such as churches, farmers' markets, flea markets, hair salons, laundromats, and recovery centers.



Collaborating with other trusted community messengers including WIC staff, pediatricians, and school districts.



Developing outreach plans that identify important cultural events and dates allowing them to more strategically tailor their efforts to reach priority populations.

Despite these successful outreach strategies, both home visiting contractors and participants reported several barriers that made participating in home visiting challenging. This included:

- **Navigating personal realities**, such as prenatal and early postpartum periods, required some participants to ask to pause services and reenroll when they were ready. Several others shared the time commitment and staying connected to the program was a challenge given family responsibilities. One parent shared their living situation did not always allow for a comfortable space to meet, sharing, "Living with my parents has been one issue. It's hard because it's never quiet here."
- **Building trusting relationships** in connecting families to home visiting services can take time. One contractor shared, "Our successful enrollments come from families who we have built trust with...so when we are [doing outreach] we try and build a relationship in the moment. Another shared, "There were some families that ended up not participating and there were others who opened their door and built that trust [with us] over time. [They realized] we were there to support and educate them, not to look for reasons to report them."
- **Social stigma** around substance use/abuse treatment was a barrier to engaging individuals in JourneyWORKs program resources. Contractors shared this often affected individuals' willingness to openly discuss their substance use with them, making referrals a challenge.

While mothers tend to be the primary caregiver participating in home visiting, fathers/partners also engage in a multitude of ways.

To engage families more holistically and help sustain positive outcomes, F5SJ invests in efforts to increase father/partner engagement in home visiting. While most home visiting participants identify as mothers⁸, interview respondents reported fathers/partners were interested in the program and participated in the visit when they were available. One participant shared how father engagement has been one of the most helpful aspects of their participation in home visiting, as it has helped the father to remain accountable to himself.

Conflicting work and school schedules were the primary barriers to participation, however, home visiting participants shared how fathers/partners often used the materials and activities when they returned home. One participant shared, "When the home visitor brings activities, I explain it to my son's dad. Then he does the activity with my son. That's how he involves himself." Another shared, "After the visit I talk to him [about what we did]. I take videos and send pictures to him. Then he knows what she's doing." One family whose father was incarcerated described how they chose to engage in home visiting content, sharing how they read books to their child via a phone call. These alternative ways of engagement illustrate how fathers are demonstrating their interest even if in different formats or times.

When asked how to more effectively reach fathers, contractors and home visiting participants shared suggestions such as continuing to invite fathers to be more deeply involved in home visiting conversations; funding programs or workshops designed specifically for fathers; and increasing male presence on marketing materials such as flyers.

"He works longer hours than I do. When he gets home, my daughter shows him the materials and talks to him about what she learned."

–Home visiting participant

⁸ 97 percent of FamilyWORKs participants identified as a female parent or caregiver.

Participants reported high satisfaction with their home visitor, valuing their professionalism, accessibility, and cultural sensitivity.

Overall, home visiting participants highly appreciated their home visitors, noting they were kind, qualified, and flexible. One participant shared, "She is very professional. It's not where she is impersonal either. She genuinely cares. She makes us feel comfortable." Another participant stated, "The home visits are at convenient times and [my home visitor] has been flexible to identify a time that works best for me."

Participants also acknowledged the ways in which home visitors honored their family's cultural and racial background. For example, one participant appreciated having a shared language with their home visitor, saying, "The fact that she spoke Spanish and I was not stressed that I had to speak in English...made me feel valued in my identity." Another participant shared, "[My home visitor] having the same ethnic background as me made me feel comfortable. Also, my dad is here, and she is able to communicate with him in his native language. It makes him feel more comfortable that the person who is coming into the home can understand him and he is able to communicate with them too." One participant noted they hadn't had conversations about their background with their home visitor and that, "I would benefit from having that conversation about my culture and racial background."

Contractors shared their aim to hire staff who have similar identities and experiences as their priority populations. One contractor stated, "I have found that when you have a provider that looks like you and understands your community and where you come from, you have that trust and then you're more likely to engage and get the help that you need."

Preferences for In Person vs. Virtual Home Visits

Overall, both parents and staff involved in home visiting reported a preference for in-person home visits over virtual services. The hands-on, face-to-face interactions were seen as more effective and engaging, especially for very young children. Parents observed their children are more attentive and interactive during in-person visits. For instance, one parent mentioned, "I prefer in person because I like the interaction and for my daughter to be able to talk to someone one on one and not through a screen. She's more focused [in person]." Another parent highlighted the limitations of virtual interaction for young children, saying, "She's so young. I don't think she would sit there very long in front of the screen. During in person visits, she starts to get up and walk around a little bit, so it helps that [me and the home visitor] are both there to redirect her." A few parents and contractors, however, did note the helpfulness in having the option to meet virtually if, for example, the child was sick, but the parent still wanted to meet or had questions for the home visitor.

"[I'm homeless] and I have never felt judged. [My home visitor] embraced my family, our socioeconomic status, and me being a biracial woman."

–Home visiting participant

Parents are more knowledgeable and resilient after participating in home visiting.

Home visiting programs aim to strengthen protective factors, enabling parents to nurture their children even when faced with adversities and stressful situations. To assess the presence, strength, and growth of Strengthening Families Protective Factors, HVI and FamilyWORKs participants completed a survey at intake and exit. The survey measures parental resilience, social and emotional competence of children, social connections, and concrete support in times of need.⁹

Survey findings demonstrated participants experienced statistically significant increases¹⁰ in both the parental resilience and social emotional competence of children domains after participating in home visiting (Exhibit 1). The parental resilience competency assesses a parent’s functioning when faced with stressors or challenges. The social emotional competency assesses if a child’s environment and experiences enables them to form close relationships with adults and to experience and express emotions.¹¹

Further, parents of children who identified as Black/African American or Latinx reported the greatest increase in resilience and social/emotional competence, compared to parents with children of other races and ethnicities.

“I have learned that at certain stages [my child] is supposed to be able to do certain things and that helps me know what I need to work on with them.”

–Home Visiting Participant

Exhibit 1. Parents’ protective factor scores before and after participating in home visiting*



* Scale is from 1 to 5 where a higher score indicates stronger protective factors

Home visiting participants also appreciated the support they received to increase their knowledge of their child’s age and developmentally appropriate behaviors. Developmental screenings and charts (such as those to track key developmental milestones), Ages and Stages Questionnaire (ASQ) developmental screenings, hearing and vision screenings, and tools like sensory blankets were particularly helpful. One parent shared, “Doing the ASQ with my daughter was comforting. I thought maybe she was going to show developmental delays, but her scores showed she was in areas where we can work with her.” Data from the Client and Service database showed:

- 646 children¹² (53% of children served overall) were screened for potential developmental delays using the ASQ.

⁹ For the purposes of this report, data is only reported for parental resilience and social and emotional competency of children.

¹⁰ n=362, p<.001. A p-value is a measure of statistical significance. When a p-value is less than .05, the finding is referred to as “statistically significant.” Statistical significance means that the changes between the data points are likely not due to random chance.

¹¹ Parents’ Assessment of Protective Factors: User’s Guide and Technical Report. <https://cssp.org/wp-content/uploads/2018/08/PAPF-User-Guide.pdf>. Accessed March 2024.

¹² Some children may have been screened prior to FY 22-23, or started the program with an existing IEP thus are not included in the count of children screened.

- The racial and ethnic identity of children screened aligned with home visiting programs’ priority populations (63% of children screened were Hispanic/Latinx, 13% Asian, and 11% Black/African American).
- Referrals for a follow up developmental assessment were made for 50 (8%) children following the ASQ screening.

Home visiting strengthened children’s school readiness, both socially and academically.

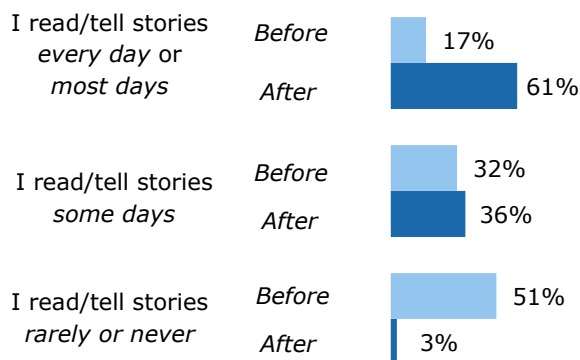
Parents cited a variety of reasons why they chose to participate in home visiting with a big motivator being to ensure their child would be ready for school. This is also the area in which parents felt home visiting made a great impact for their child, strengthening both their social/communication as well as their academic skills. One parent shared their son is more vocal, attentive, and communicative because of home visiting. Another shared how home visiting has been helpful for their child’s speech and communication, which will be instrumental for socializing with other children. They explained, “I liked that my daughter socializes with the home visitor. It’s like a type of training for preschool. It teaches her to trust the teacher.” Excitement for going to school was another positive outcome shared by parents.

Early literacy practices, including parents reading to their child, are important contributors to a child’s academic success. According to the HVI and FamilyWORKs surveys, 61 percent of parents reported reading or telling stories to their child at least five days per week, compared to just 17 percent at program start (Exhibit 2).¹³ Additionally, most parents (84%) increased how often they read or told stories to their child. One parent described how the home visitor would read books to the child in English while the mom would read the books in Spanish. Another parent explained, “Before we had [my daughter] my husband never picked up books, but now he reads on his own and with her.” Parents of children who identified as Latinx (85%) and parents whose children were monolingual Spanish speakers (53%) reported the greatest increases in reading frequency.

“She now is motivated to go to school. [When the home visitor comes] she grabs her book and pencil. She wants to learn.”

–Home Visiting Participant

Exhibit 2. Engagement in family literacy practices before and after participating in home visiting



¹³ n=506-508. Data are from participants who completed the literacy questions on both the pre- and post- program survey. The total number of responses varies by question.

Home visiting encouraged parents to prioritize healthy eating and physical activity habits.

Families who participate in the Health Education Program receive information and strategies for leading healthier lives. Parents reflected on how this program informed them of the benefits of healthy eating practices as well as the benefits and importance of modeling healthy eating habits for their child. One parent shared:

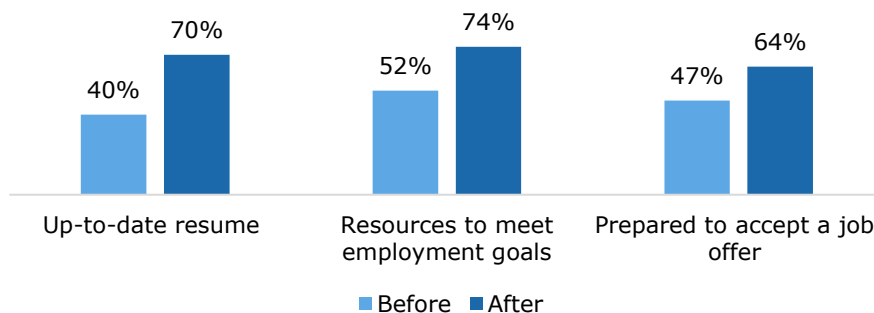
“So far, all the things I learned I have been able to use. [The home visiting program] has helped me to really open my eyes to the unhealthy habits I had. The small things I changed about exercising, drinking more water, and making healthier meals...I am incorporating these things into my daily life.”

In other instances, parents reflected on changes they have seen in their child’s eating habits, especially around openness to new foods. One parent explained, “The fact that he is willing to try new foods is wonderful. Previously he would scream...and now he is willing to try them.”

FamilyWORKs increased parent’s job search and readiness skills.

A key goal of FamilyWORKs is to support parents to meet their employment and self-sufficiency goals. At program exit the FamilyWORKs survey demonstrated 70 percent of parents had an up-to-date resume, compared to 40 percent at program entry (Exhibit 3). Additionally, after participating in FamilyWORKs, 74 percent of parents indicated having the resources and support needed to meet their employment goals, compared to 52 percent at program entry. Lastly, nearly two-thirds (64%) of parents felt prepared to accept a job offer at program exit, compared to 47 percent at program start.

Exhibit 3. Job readiness skills before and after participating in FamilyWORKs

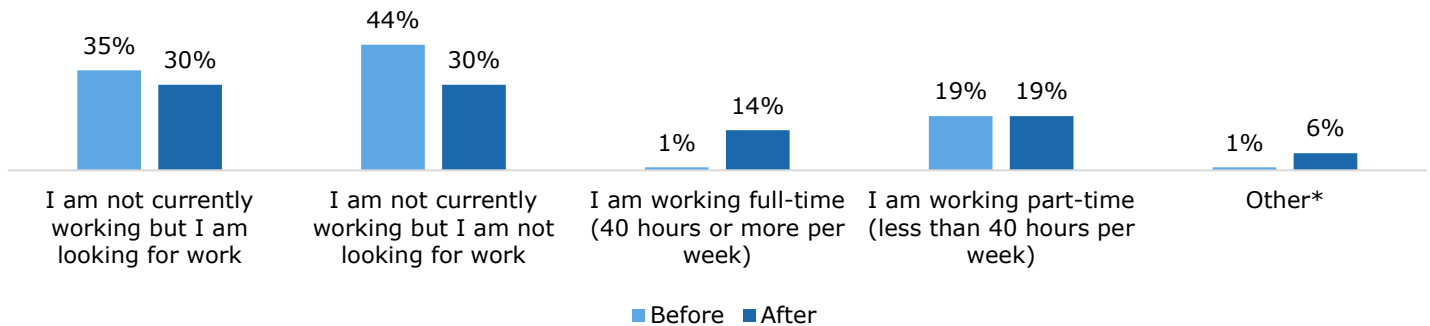


FamilyWORKs also supported parent’s ability to obtain or keep employment (Exhibit 4). When looking at the employment status of FamilyWORKs parents at program start, 44 percent reported not currently working and not looking for work, 35 percent were not working but looking for work, one percent were employed full-time, and 19 percent were employed part-time. After participating in FamilyWORKs, the percentage of parents not working (either not working and looking for work or not working and not looking for work) decreased while the percentage of parents working full-time increased.

“We had a Black urban farmer who shared about the importance of whole nutritious foods for your family...and that you can grow in an apartment or in your backyard”.

–Home Visiting Participant

Exhibit 4. Employment status before and after participating in FamilyWORKs



*Other examples include in the process of being hired, full/part time student, caring for family members, working for a church, and international employment.

Parents with children who identified as Black/African American or Latinx – communities who disproportionately experience discrimination in employment practices¹⁴ - saw the greatest improvements in their ability to keep or maintain employment. For example, at program start, 20 percent and 21 percent respectively, had employment of any type, but after participating in home visiting 35 percent and 31 percent had part time or full-time employment.

Opportunities to Improve Home Visiting

The data collected as part of this home visiting report document suggests programs are making important strides in meeting their goals. Programs reached their priority populations and served as a trusted resource. As a result, parents are more self-sufficient, and their children are better prepared for school success. The following recommendations are ways F5SJ, and its contractors can enhance participant experiences and strengthen the program in the future.

Continue to invest in training to strengthen the home visiting workforce.

Throughout the report, data suggest training opportunities for home visiting programs, particularly as they relate to F5SJ’s equity goals. These could be hosted by F5SJ, or contractors may use their own training dollars to strengthen staff capacity. Suggested topics include:

- **Culturally sensitive outreach and engagement.** Given participants’ complex and intersecting identities, home visitors may need to expand their tool kit to be able to engage in culturally sensitive practices more fully. This could include ensuring home visitors feel comfortable and confident talking to participants about their identities (e.g., gender orientation, culture, race, preferred pronouns); understanding and learning about important cultural traditions, celebrations, and holidays; as well as well as navigating conversations about the impact of culture and race in the context of early childhood systems.
- **Parents as the child’s first teacher.** One of the roles of the home visitor is to educate parents on how to use age-appropriate activities to engage with

¹⁴ U.S. Equal Employment Opportunity Commission. Facts About E-RACE. <https://www.eeoc.gov/initiatives/e-race/facts-about-e-race#:~:text=The%20most%20frequently%20filed%20claims,from%20opposition%20to%20race%20discrimination>. Accessed March 2024.

their child. However, some data in this report suggests parents identified their home visitor as their child's teacher rather than someone who was there to support them to teach their child. Training that reviews the role of the home visitor versus the parent may be beneficial.

- **Other training topics.** Contractors also suggested training on specific topics such as supporting parents with children who have special needs, the Life Skills Progression family assessment tool, strategies to mitigate substance use-related stigma, father engagement, and navigating their own stress management and compassion fatigue. Some contractors also shared challenges with the ASQ not reflecting relevant experiences and norms. Training on these topics, including refresher training for staff on how to score the ASQ to reflect cultural norms and expectations could be helpful. Some of these topics may also be discussed during contractor meetings (see recommendation below).

Consider expanding opportunities for contractors to meet more regularly.

Several contractors noted the helpfulness of the quarterly contractor meetings and suggested even more opportunities to connect with other agencies. Agenda items could include best practices for navigating the Parents As Teachers (PAT) website, strategies used by contractors to translate materials to help ensure they resonate with different priority communities, how to re-establish relationships with schools following the height of the pandemic, recruiting home visitors who reflect the cultural and linguistic diversity of the participants, and navigating caseloads – all challenges contractors raised during interviews.

Continue to prioritize in person home visiting services. Overall, both parents and staff preferred in-home, rather than virtual visits. The hands-on, face-to-face interactions were seen as more effective and engaging, particularly for children. However, some were thankful for the option of a virtual check-in when their child was sick and could not meet, but they still wanted to connect with the home visitor. F5SJ should continue to prioritize in person home visiting services, having the option for parents to meet virtually on an as needed basis. Programs should continue to be attuned to the barriers related to virtual visits such as challenges building rapport with parents as well as equitable access to and comfort with using technology.

Engage contractors in discussions about how to increase and track father engagement. Contractors and participants shared several suggestions to increase father/partner engagement in home visiting. This included refreshing outreach materials to appeal to more fathers/partners (e.g., changing the overall design or "look and feel"), engaging fathers more intentionally in home visiting, and funding programs/services designed specifically for fathers. Engaging contractors in a follow-up conversation will be helpful to identify strategies for engagement given available resources, funding requirements, and staff capacity, as well as what data to collect to more fully understand and track father engagement.

Explore the provision of additional family engagement activities. Several parents suggested more activities for them to do with their children, such as parent-child yoga classes, teddy bear socials, and other community-building events both for parents and children. One parent suggested programs provide more information about other programs/supports once children age out of home visiting services.

Technical Appendix

- **Interviews with home visiting participants (n=16).** Interviews were conducted with home visiting participants to better understand their experiences with outreach; materials and resources; as well as the format of the home visits. Participants were also asked about the cultural competency of their home visitor as well as any changes their family made because of their participation.
- **Interviews with home visiting contractors (n=10).** Interviews were conducted with staff at agencies implementing home visiting programs. Respondents included both home visitors and supervisors. Interviews explored respondent perspectives on strategies to reach priority populations; available services, materials, and the curriculum; impact on families; efforts to center race, equity, diversity, and inclusion; as well as opportunities to improve home visiting moving forward.
- **Participant survey (HVI n=345, FamilyWORKs n=65).** Parents in HVI and FamilyWORKs completed a survey at intake and program exit. The survey contained questions related to family literacy practices and participant characteristics. It also includes a series of measures – the Parents’ Assessment of Protective Factors (PAPF) – that was developed to assess the presence, strength, and growth of parents’ self-reported beliefs, feelings, and behaviors. This report includes responses from parents who completed both the pre and post surveys.
- **Client level database.** All F5SJ home visiting programs use the Client and Service database to gather client level demographic and service information for participating families.