

A Closer Look at the Early Head Start Home-Based Program Option

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Angie Godfrey: Good afternoon. Welcome to "A Closer Look at the Early Head Start Home-Based Program Option." My name is Angie Godfrey and I'm one of the infant and toddler program specialists at the Office of Head Start.

On behalf of Office of Head Start Director Yvette Sanchez Fuentes, it is my pleasure to welcome you and thank all of you for joining us. As you know, the Head Start program has provided comprehensive child development services to low-income preschool children and their families since 1965. And since the mid-1900s, we've also provided services to pregnant women, infants and toddlers, through Early Head Start.

Early Head Start was created in response to research that demonstrated the first three years of life are a period of tremendous growth and that babies' health and development are directly influenced by the quality of care they receive and the relationships babies, families, and caregivers have with each other during the first three years. Early Head Start programs serve pregnant women, infants, and toddlers through center-based, home-based, and family child care program options, as well as combination and locally designed program options. In today's webcast, we'll be focusing on the home-based program option.

Early Head Start families choose the home-based program option for many different reasons. Some families choose it because they want child development and family support services provided in their home and home visiting best meets their needs. Others choose it because their life circumstances might prevent them from participating in more structured settings, and working in their home with a home visitor may be the best option for them. In addition, families in rural areas often receive home-based services.

The home-based program option is one many Early Head Start families prefer because it provides them the best access to Early Head Start comprehensive services through weekly home visits and biweekly socialization experiences. Families value the close relationships that they develop with their home visitors and how the home visitors help them use what's available in their own environment to support their child's development. Families also appreciate the interaction they get with other families who have babies and toddlers at the biweekly socialization experiences. It can mean so much, particularly for teen parents who may not have friends who are going through the same experiences, or families who may be isolated for different reasons, such as living in a rural area. They share their parenting successes and challenges with each other and learn about their babies together. These are all great strengths of this program option.

This is a very exciting time for Early Head Start, and for the broader child care community across the country, as opportunities for home visiting expand for families. The 2010 Patient Protection and Affordable Care Act allocated significant funds to states to expand home-based to evidence-based home visiting programs in at-risk communities through the Maternal, Infant, and Early Childhood Home

Visiting Program. The funds are intended to assure the effective coordination and delivery of critical health development, early learning, child abuse and neglect prevention, and family support services to children and families living in at-risk communities.

Once the Affordable Care Act passed and all criteria were developed, the Department of Health and Human Services commissioned a thorough review of the home visiting research literature to identify home visiting program models targeting families with pregnant women and children from birth to age five that show evidence of effectiveness. This study, called the Home Visiting Evidence of Effectiveness Review, identified eight home visiting models that had a sound body of research demonstrating their effectiveness. We are very proud that the Early Head Start home-based program option was selected as one of the models.

Under the Maternal, Infant, and Early Childhood Home Visiting Program, states and tribal communities have the opportunity to apply for home visiting funds. When they apply, they identify which evidence-based model or models they will implement. We, at the Office of Head Start, have been providing assistance to states to help them understand what Early Head Start is, what our program performance standards are, and what it means to implement our model with fidelity. The home-based program option has been an option for Early Head Start programs since its inception. This option provides comprehensive child development and family support services through weekly 90-minute home visits and twice-monthly socializations. Approximately 45 percent of children and families enrolled in Early Head Start participate in the home-based options.

There are so many things that are special about the Early Head Start home-based program option. For me, one of the most special things is the trust that families place in us. Home visiting is very intimate work. Families open up their homes to us. We're in their kitchen, on the floor with their baby, and we're in their living rooms. It's a very close relationship. The bonds formed between families, home visitors, and babies are very strong and often last long after the child transitions out of Early Head Start. In today's webcast, we'll give you a closer look at what the Early Head Start home-based program option is all about, how it works, what some of the issues and challenges are that home visitors face, what kinds of support home visitors need to provide the highest quality services to pregnant women, infants, toddlers, and families. We hope it will give you a better understanding of how this wonderful program option meets the unique needs of vulnerable families in many different communities.

Thank you.

Lillian Sugarman: Thank you, Angie, for that wonderful introduction, and thank all of you for joining us. I'm Lillian Sugarman, the director of the Early Head Start National Resource Center, and I'll be your moderator today.

Today, you'll hear from our panel about how the Early Head Start home-based program option works. We've asked them to talk about the value of partnering with families in this option and building relationships. We'll also discuss what it takes to be a home visitor, some of the issues and challenges home visitors face, and what kinds of professional development and other supports they need to provide the highest quality care to pregnant women, infants, toddlers, and families. Our goal is to help

all of you gain a better understanding of what it means to have quality implementation of the home-based program option. To help us do that we have a great group of panelists with us today.

First, I'd like to introduce David Jones, Home Visiting Program Specialist in the Education and Partnership Division at the Office of Head Start. Prior to joining the Office of Head Start, David served as an Early Head Start director in Far Rockaway, Queens, New York. Next, is Jennifer Boss. She's a director of Program Operations at the Early Head Start National Resource Center. Jennifer formerly was a home visitor with an Early Head Start program. We also have Joanny Rose Ruiz, who is the Early Head Start director at the Educational Alliance in New York City. Joanny's program serves about half of their families through the home-based program option, including many new immigrant families. And last, but not least, please join me in welcoming Lucia Mizhquero, a home visitor from the Kennedy Institute Early Head Start in Washington, DC. Lucia has been with the Kennedy Institute for a year, but has been a home visitor for years, and she's also a former Early Head Start parent herself. Welcome to all of you.

Today's webcast will feature a discussion with our panelists about this program option, and we'll also have time at the end for a live Q&A. If you have any questions for our panelists, you can submit them by typing them into the Q&A field on the right side of your browser. In addition to your questions, we really want to hear your feedback. You will receive a brief evaluation by email and we ask that you complete that evaluation, providing us with your feedback so that we can continue to develop webcasts that meet your needs. You also may send any comments or suggestions you have to the email address you see on your screen now: ehswebcast@esi-dc.com. We also have developed a Viewer's Guide to accompany today's webcast. If you haven't had the opportunity so far to download the Viewer's Guide, we encourage you to do so now using the link on your browser located under the word "Resources," on the right side of your viewing screen. I also want to let our viewers know that an archive version of today's webcast will be available through the Early Head Start – through the Head Start Early Childhood Learning and Knowledge Center, the ECLKC. Now, David, to start off our conversation, could you please give us a little background on the Early Head Start home-based program option and what the essential elements are.

David Jones: Thank you, Lillian. First, I think it's helpful to get an idea of how many infants and toddlers are served through the Early Head Start home-based program option. In the 2010 enrollment year, there were 43,796 Early Head Start federally-funded home-based enrollment slots for infants and toddlers. As Angie said earlier, this constitutes about 45 percent of the national Early Head Start-funded enrollment for infants and toddlers. The other 55 percent are served through center-based care, family child care and combination options, or locally designed program options. All of these program options are strategies for achieving the same mission, which is to promote healthy prenatal outcomes for pregnant women, enhance the development of very young children, and to promote healthy family functioning. In the home-based program option, the home is a child's primary learning environment rather than a center, or a family child care setting, and as Angie said, a family might choose this option for many different reasons.

There are several elements that make up the home-based program option. First, there are the home visits. A home visitor goes to the child's home and conducts a home visit with the child's parents or

primary care giver for 90 minutes once a week, generally on a year-round basis. The purpose of this home visit is to support parents in their roles as primary caregivers and to facilitate the child's healthy development. The home visitors do lots of different things during these home visits. So, in the beginning, they spend time getting to know the family and building a comfortable trusting relationship. They ask about the child's daily routine, medical history, and what foods they eat. They talk about the family's hopes and dreams for the child, and about any challenges that the family's facing. The home visitor will also conduct a developmental screening within 45 days of the child's entry into the program to identify any concerns about a child's developmental functioning. This screening doesn't tell you whether or not the child has a developmental delay, but it determines whether further evaluation is needed. He or she also conducts an ongoing developmental assessment, observing the child on a continuing basis, as well as learning from parents and other family members about the child's development and behavior. Parents play an active role in the developmental screening, ongoing assessment and evaluation of their child because, of course, they know their child best.

All of the information that is gathered during the screening, ongoing assessment, and evaluation, is used to create a family partnership agreement which identifies the goals that the family has for their child's development and learning. The home visitor collaborates with the family to develop an individualized curriculum for the child to meet those goals. The Head Start Program Performance Standards define curriculum as a written plan that includes the goals for the children's development and learning, the experiences through which they will achieve these goals, what staff and parents do to help children achieve these goals, and the materials needed to support the implementation of the curriculum. The curriculum must be based on sound principles of how children grow and learn, and be consistent with the requirements of the Head Start Program Performance Standards. The home visitor helps implement the individualized curriculum that has been developed by supporting parents in meeting their goals, their child's goals, through every day interactions with the child at home.

Now, sometimes that might mean teaching the parents how to use simple objects found in the home, like egg cartons and blocks, to support their child's development, or it may mean teaching the parents to support their baby's motor development skills by showing them how to give the baby a little tummy time on the floor. Or, they might teach the parents how a gentle touch or rocking helps build a close, nurturing relationship with the baby so that the baby feels safe and cared for. We know this is very important for the baby's brain development. In addition to the home visits, the families participate in group socializations. These group socializations are offered twice a month and are designed to support child development by strengthening the parent-child relationship. The families come together as a group and then they learn about child development and development parents, and how to support the parent-child relationship.

Lillian: Thank you, David. We have a clip from a great video about the home-based program option called, "Head Start: Beginning at Home." And, it shows some of what David's been talking about, both the home visits and the group socializations. In this clip we'll see a pair of home visitors in New York who are working with a baby, Natalie, and her parents, Patricia and Elvis. So let's take a look and see what it says.

Narrator: Berkis and Miriam have worked together to support Patricia through many challenges since Natalie's premature birth.

Patricia: She starts out, she start's turning, and that's how she'll get here.

Berkis: I remember the other day she was going around. Like that.

Patricia: Now she's turning side and side, and she pushes herself that way. Come on, come on.

Berkis: I think it's very beneficial for Natalie to get home visit because it's a chance to work in an environment that both of them feel comfortable in.

Patricia: You'll make it. Come on. There you go. You almost got it. One more. Very good!

Berkis: You remember last week in class, when she was going around in circles?

Patricia: Yeah.

Berkis: And that's, kind of, the way that she moved last week.

Patricia: Now she's learning how to move sideways. She rocks sideways to reach something out of her grasp.

Berkis: I remember when we came one day and you said that she was rolling, and she's, she's keeping more focused like she will give up more easily before.

Patricia: I was 27 weeks pregnant when I had her. She was one pound, 13 ounces when she was born. She stayed in the hospital for three months. She was born February. She was let go May.

Patricia: A da, da, da. Berkis and

Patricia: A da, da, you did it!

Berkis: Have you been practicing floor time at home?

Patricia: With premature children it's a very, very rough road. It's like, you got to take – learn how to take it one day at a time.

Berkis: This is the first premature child that I have ever worked with. I've been doing some reading, sort of, to get knowledge about what is expected, what is the next stage, step that Natalie's going to be doing, and basically I just meet Natalie at the level where she's at and try to take it from there.

Patricia: She's doing this.

Berkis: She is?

Patricia: She's counting fingers to make sure all of them are there. Say, "One, two, three." That's one thing with Berkis, she's always planning new things for Natalie. I like, "Berkis, I'm not sure she could do

it." She's like "yeah, yeah. She could do it. Let's do it." That's the way she helps me because I'm really afraid of trying new things with her. She gives me confidence to go, "Okay, let's go ahead, let's do it. She'll be okay." And she's – I trust her. If Berkis says we could try it, I'm like let's try it.

Narrator: The relationship Patricia has built with Berkis and Miriam inspires her to consider new possibilities for her daughter. Together they set goals to build on Natalie's emerging skills. The weekly socialization reinforces the work they do on home visits.

Berkis: Who's that? Who's that over there? Who's that girl? We try to put the rattle a little farther and when she masters that we will do something else, but right now it's focusing on, on having Natalie reach the rattle and, sort of, work her way towards the rattle. So it's intentionally that we do it at home, and we do it here.

Patricia: Little by little, yeah. They've been helping me recognize and helping me, like, understand everything she's doing, and whatever she's doing they, like, help me to better it. Like, if she's starting to rock, I'm like okay, put a toy out of her reach so she's going have to rock and reach for it, and learn how to reach for something.

[Parent speaking Spanish]

Narrator: Natalie's father, Elvis, participates in weekly socializations that support her development, as well as provide social time with other children and parents.

[Group singing in Spanish]

Patricia: This – it's a great thing. It's the best that could happen, even starting them off so small. Some people say, "Oh, what they going to do? They're just babies, they don't even sit." I'm like, they do a lot. And, they learn a lot.

Berkis: I feel fortunate that I have the opportunity to have such an input in the family's life. I feel a great responsibility doing it, that's why every day I want to do it the best I can.

Lillian: That clip gives you a glimpse into the kind of work that goes into home visiting. Home visitors do what a home visit and socialization might look like, but of course, they're all different, depending on the community and the individual needs of the child and the family. If you'd like to see the complete "Beginning at Home" video, showing some of the other examples of home visitors and group socializations, it can be found on the Head Start Early Childhood Learning and Knowledge Center. David, what else do we need to know to understand the big picture of the home-based program option?

David: Well, for Early Head Start programs that enroll pregnant women, home visits are conducted to ensure that pregnant women have access to comprehensive prenatal and postpartum care. Home visitors teach the mothers about topics such as the baby's fetal development, what they need to know about labor and delivery, what they can expect about their recovery after the baby's born, and the benefits of breast-feeding. It's up to each program to decide where these services should take place. Sometimes they take place in the woman's home. For other families, they might take place in a clinic, a

family support center, or some other location that suits the family's needs. The length and frequency of the visits are based on the family's needs and goals. Pregnant women aren't required to participate in group socialization experiences, but some Early Head Start programs do invite expectant families who will be transitioning into the home-based program option to attend socialization experiences. Others design group experiences just for expectant families. It's a really nice way for parents to interact with others who are at the same stage of pregnancy and to get support and advice from other parents and professionals. That can really reduce the social isolation that many new parents experience, particularly when they're teenagers, as so many of our Early Head Start parents are.

Lillian: Thank you, David. Angie explained in her introduction that there is research showing the effectiveness of the Early Head Start home-based program option. Jennifer, could you please tell us a little more about that? What do we know about the effectiveness of this program?

Jennifer Boss: Absolutely. Well, we know quite a bit from the Early Head Start Research and Evaluation Project. And, this was a study of 3,001 children and families from different sites, representing different program options, racial and ethnic backgrounds, and regions. In 1996, these children and families were randomly assigned to either receive Early Head Start services, or to be placed in a control group that could use any community services except for Early Head Start. The children and families were then interviewed about their services at different intervals. In this kind of randomized control design where participants are assigned by chance to either a treatment group or a comparison group is the kind of study that is considered the most scientifically valid. The study found that home-based services resulted in positive impacts on several parent outcomes when children were 24 and 36 months old. When children in the Early Head Start home-based program were 24 months old, their parents, as compared to the control group parents, provided more stimulating home environments, participated in more bedtime reading, and had greater knowledge of child development. They also reported less parenting stress and greater involvement in education and training activities than the control group parents. When the children were 36 months old, the Early Head Start parents were more supportive during play and reported less parenting stress.

Those are the outcomes for the parents. The children in the Early Head Start home-based program option showed stronger vocabulary development at 24 months old than the children in the control group, and at 36 months, the children were strongly engaged with their parents during play, which is a measure of social-emotional development. So, we know from this study that there are strong impacts on both parents and children who receive services through the Early Head Start home-based program option. We also know that the impacts were greater in those home-based programs that fully implemented the Head Start Program Performance Standards. That made a big difference. Now, we also know that getting these great outcomes means having really strong home visitors, and home visitors who, as Angie said, are able to do that really intimate work with families in their homes. Home visitors need to wear so many different hats, and they need to have knowledge and experience in child development and early childhood education, as well as child health, safety, and nutrition. But different from center-based program option are the family child care option where the providers work directly with children in their homes, home visitors work with the parents in their homes, to, and the children in their homes, to improve the parent's capacity to support their child's development.

So the home visitors also need to have a good understanding of adult learning styles and family dynamics. They need to build trust and rapport with the families who are letting them into their homes, and this can take quite a bit of time and delicacy. They need to be skilled at communicating with families, engaging with families to build a bond or a partnership with them, and motivating them. In addition, they have to have knowledge of all of the different kinds of community resources that are out there and be able to link families with appropriate agencies and services. So, in other words, home visitors need to be skilled at working with babies, and adults, and the larger community. It can be really stressful, and home visitors often work in isolation, and they work with families who are in crisis or experiencing trauma. They need a great deal of support and supervision, and they need to have a safe time and place where they can talk freely about the families they work with and get supportive feedback about their work.

Lillian: Thank you, Jennifer. It's so important that we remember how unique the job of the home visitor is. As you said, and as Angie touched on earlier, when you're a home visitor, you're in someone's home. It's very personal. It's exposing who you are and opening up your private life to someone else. It takes a special person to be a home visitor, and someone who knows how to respect a family's culture and how to respect boundaries. It's tough, demanding work but also so rewarding, because you're able to develop a closeness with the families that are on a very deep level. I'd love to hear from our program representatives about their take on the home-based program option. Lucia, you've been a home visitor for a long time. What are some of the strengths of the home-based services from your perspective?

Lucia Mizhquero: One of the strengths of the home-based program option is that we can build such a close relationship with the families because you get to know the families in their own environment. It is very different from the center-based care, where the parents come, they meet the teacher, and they go. As a home visitor, I go into the family's homes and get to know them on a whole different level. I get to know their surrounding. I see what happen with the child and the parents at home. I am able to identify their needs and connect them to a resource in the community. The process of building a relationship with the family begins from the moment I recruit them in the library, on the street, or wherever they are. And from that moment on I have the connection with them, then it takes time to build the relationship. It takes commitment, it takes responsibility from both the home visitor and the parent. When I enroll a family, I use a home — I use a Home Visitor Agreement to say that the family's responsibilities and what my responsibilities are, so we both know what we are going to do. I always look at the strengths of the family and build from there. For example, if I have a parent who is not able to read and write, but who is excited to learn more about child development, I can work with that interest. I can take them information and read it to them and we can discuss it, and I help the parents find the resource in the community. Some parents are willing to take English classes. I encourage parents to develop reading habits. Some of them come from the cultures where they do not read, and they can — and I can help them to break the cycle. I invite the family to the library and help them to get a library card. I also teach them that it's not necessary to buy books. They can make their own books out of cutting the magazines or the newspaper. I can read — I can work with what they already have in their homes. I use their own materials, and also to build their own strengths. I also help parents to adapt to a new culture and learn a new parenting skills, such as positive discipline. I teach them to report domestic

violence and child abuse and neglect. And the most important thing that I teach them is that the parents need to take time to play with their children and have fun.

Lillian: Thank you, Lucia. Recently we got together with a group of Early Head Start program directors and home visitors to talk about the home-based program option. Many of them also talked about the importance of using a strength-based approach and how the close relationships that the home visitors develop with families are so important. Let's take a look at what some of them said.

Lourell Robb: Our program is unique in the fact that we value parents, and we have a strength-based approach. We assess families. We do assess their needs. We assess their strengths because we want parents to feel like they're valuable. They are their children's first teachers. They know what they're doing, and we want them to take charge. And so, that's the approach that we take. Sometimes it's difficult because, as a home visitor, we tend to go in there as saviors of the world, and sometimes it's so difficult, right? So, one of the challenges that we may face is that we would like to out step our boundaries and I guess, our home visitors, you go in there, you want to fix the world, but we are there to empower parents, to make them self-sufficient, so one of the things that I say to home visitors, you know, go in there, mom have lots of strengths, and we're going to build upon the strengths. And that has made our program successful. I think relationship is so important. You do not, because you are going in there to impact the lives, the life of a family, right? And that relationship, there are boundaries, right? You're not a family member. You are not, again, a savior, but you are there to help that parent bridge those gaps in a new society that they are not, they're not used to. Again, relationship is key. And once you start that and they, that level of trust is there, that level of respect, because we want to meet parents where they are and gradually remove them from things that we know are not conducive to the well-being of the children, because we're not there to share, to change mom and dad, but with examples, and with the right coaching, and the right training, they, on their own, will figure out that what they're doing can't – there is another alternative to what they're doing.

Angela Foster-Snow: I've always said that home visiting is, kind of, the secret part of Head Start, because it's, it's such a quiet service. And, going into somebody's home is so private and intimate, and it takes such a high level of acceptance to really allow somebody to come in and not feel like you're being judged, or that somebody's in there to inspect how you're living, or how you're raising your children. And so, that opportunity and, and the fact that we have such a great team of home visitors, and can make families feel welcome, and make families feel like none of those things are an issue, is really amazing. And, the relationships that, you know, that you know are happening between kiddos and their home visitor, and parents and their home visitor last forever. We have families that transition out of our program that still come back to us as a resource in the community long after their kiddos turn age of three. It's really, for me, refreshing that we have a option that is totally based on relationships between parents and their home visitor. And, that relationship-based model is what Early Head Start is all about. And so, when you look at the family and the relationship that they have, and the empowerment that they get from an educator that comes into their home and really provides an opportunity for the family to take the lead, and decide what the next home visit's going to be about, and answer the questions that they have, and empower them to be the very best parents that they can be, is, is a gift. And, home visiting in Early Head Start is – that's what it means to me. It's just that great opportunity.

Lillian: Joanny, a lot of what we just heard about the intimacy of the home-based services and the relationships that home visitors build with the families, must really ring true to you and your experiences in your program. Can you tell us about that?

Joanny Ruiz: Yes. I agree. I agree with how important it is to meet families where they are and to build those close and trusting relationships with them so that you can help them capitalize on their strengths and empower them as parents. We've had an incredible experience in our Early Head Start program, building relationships with some new immigrant families, and understanding and respecting their culture has been a big part of the relationship-building process. Our program is in the lower East Side of New York City and the population we serve is very diverse. We have, for example, second generation families of Puerto Rican descent, as well as other Latino and African American families. We also have many new Chinese immigrants that have moved into the area over the last five years from the Fujian province, which is a rural area in China. To serve these families, we've had to go out in the community and recruit and train staff who spoke the language, and understood the culture, and really cared about working with infants and toddlers, and their families. We found that the Chinese immigrant families were very interested in the home-based program option. I hired one home visitor who spoke the same Chinese dialect as the family's, and trained her and her caseload filled up right away. Then, I hired a second home visitor who spoke that dialect, and her caseload filled up right away. Now we have a waiting list of families who are from this area in China and who are very committed to this program option.

Lillian: Well, what are the home visits like with these new immigrant families? We have families per home visitor and we do weekly home visits. Doing the home visits can be very challenging. Real estate in New York City is very expensive, so some of the families are not just doubled-up in apartments, but they're quadrupled-up. For instance, there will be a three-bedroom apartment with a living room, and in each of the rooms there's an entire family: mother, father, and two or three kids per room. The kitchen and bathrooms are the common areas. It can be stifling and it feels uncomfortable because there's no space or privacy. It can be a real challenge for the home visitors to provide services in these homes. And for the children who are learning to crawl and walk, they just don't have the physical space they need to stretch their muscles. There is also very little space for the home visitors to have private conversations with the parents about their children, so that sometimes we have to adapt. We individualize for each family and we have to be creative. Sometimes, in the warmer weather, we've got outside with the families. We've also met the child in another family member's home, or at our site if necessary. As the challenges present themselves we try very hard to adapt while still following the Performance Standards. We do our group socializations twice a month and these are very important to the families. It's really a chance for the children to get together with the other kids to play in a quality early childhood environment, to have toys. The parents come together and they really feel like it's a community.

Lillian: Thanks, Joanny. David, what Joanny is saying about the families having difficult living situations and the home visitors having to adapt to that, is something I guess a lot of programs experience in one way or another, isn't it?

David: Yes. The circumstances, of course, are different in every community, but in Early Head Start, we always serve the most vulnerable families. That means they often have difficult living situations or live in buildings or neighborhoods that aren't the safest, but we always approach the family with sensitivity and work within the realities of their circumstances. And as we talked about earlier, we always focus on the family's strengths and capabilities. Yes, they might be living in an overcrowded apartment, but they have a roof over their heads, and their children are safe. They're willing to come to group socializations to learn how to better support their baby's growth and development. It's so important to use a strength-based approach, and to build on the protective factors that exist within the family.

Lillian: Thanks, David. Of course, it takes time and training for home visitors to learn how to use that strengths-based approach. Joanny, what kind of training have you done with your program?

Joanny: We've had trainings on culture and how to make your evaluations appropriate for infants and toddlers of different cultures. I wanted everyone to be very clear about how to do that. Also, individualization has been something that we've really had to focus on, especially since we work with such a diverse community. Not only are the families that we work with diverse, the home visitors are diverse, themselves. We have group meetings with the home visitors, and I make sure that they work as a team and mentor each other. Lately we've been feeling that the families we're working with are really fragile. They're experiencing homelessness and domestic violence, and we have seen child abuse and neglect, so we've been focusing on identifying stressors, being able to see when a child or family needs more clinical expertise than our home visitors have, and then bringing in a mental health consultant. We have really relied on our mental health consultant. We've increased her hours because we feel that we needed to, not just because of families that we work with, but for the wellness of our own staff. We wanted to make sure that their needs were being met, as well. Through our mental health consultant, we've been able to partner with clinical social worker from a post-graduate institute in our area. These post-graduate interns want to work with families of young children and so we've been able to match them with some of our home visitors, and that has been very helpful. They go on home visits together and afterwards they meet and go over the things they've talked about with the families. For home visitors, this has been a great learning experience. Sometimes home visitors feel isolated and out there on their own. To be able to pair up with someone else has been a wonderful – has been really wonderful for them. They've been able to increase their knowledge and their ability to identify, identify stressors. Once they know what they're seeing, they can make the right referrals and ask for the help they need to better serve the families.

Lillian: Thank you, Joanny. You know, a lot of what you're saying about families being under so many stressors and home visitors needing good support systems to help them deal with that is similar to what we've heard from other programs across the country. And we have a clip of an Early Head Start program director from Missouri, just talking about this very topic. Let's take a look.

Loletta Combs: One of the greatest current challenge is about just the mental health needs of families that are unmet, either because of limited resources in the community, or the family has limited resources themselves. They may not have insurance that would help support counseling services, so you know, we have family situations where there's a need and a home visitor may be the only

interventionist going into that environment. So, their really like service coordinators for other program entities because they're really doing their best to connect families with other service delivery systems or resources in the community, and networking with those community providers so they have a good understanding of what Early Head Start's trying to do, and then just how we can refer back and forth between programs to support families.

Lillian: This past year, the Early Head Start National Resource Center contracted with WestEd's Program For Infant and Toddler Care to offer four week-long home visiting training institutes for home visitors and their supervisor. We asked Ron Lally at WestEd to share with us what some of the home visitors had to say in his training program, and he told us that this issue of families coping with stressors and home visitors needing good support came up a lot. Let's listen to what he has to say.

J. Ronald Lally: This year we, we trained about 700 people in four trainings around the country on the home-based option in Early Head Start. These were all people relatively new to home-based, and what we did is we had them come together for a week each time. And it was an intensive experience for them, and it was quite powerful. One of the things that comes up consistently, and we had it in every single training, was the issue of balance with regard to trauma, issues of violence and neglect, and, and people were wrestling with how much should I do as an individual to be able to meet all of the needs of the, of the families, and how could I know when it's – I'm out of my depth and I need to transfer this family through referral to somebody else to do the service? That came up a lot. Another thing that came up had to do with emotions, the emotions of the family members and the emotions of the home visitors. What did they do with the fact that they're really angry at this mother because of the way that they perceive the, the child is being treated in the moment, or what do they do with their fear? And, there was a lot of conversations about the importance of reflective supervision and being able not to just talk about how is the child developing, but also to talk about how am I feeling about it, how do I handle these feelings, how do I deal with the feelings of the parents. Home visitors were asking, begging for, more time for reflection. They wanted to be able to meet with other home visitors and hear what they had to say, and they also wanted to have their, their cases dealt with in a way where a supervisor or their peers could decide, well, you know, you're running against a, up against a brick wall there, maybe go this direction, or, this is a, a case that's in need of referral.

Lillian: Joanny, you talked earlier about how you mentor your home visitors and how they're paired with a mental health consultant whom they can debrief with, and, as Ron says, home visitors are really begging for more time for reflection so that they can process all of the stressors they encounter with families. Lucia, could you tell us about the supervision that you receive? Do you meet with a mental health consultant?

Lucia: Yes. I meet with our mental health consultant once a month; we meet as a group and we discuss our challenges with the families, as well as personal concerns. But, I am very lucky to have a good team. We are very diverse, and we respect each other and understand each other's culture. Also, we support each other. If one home visitor is strong in one area, we can go and ask her for help. I also meet with my supervisor every other week for reflective sessions. During that, during that meeting I talk about the activities that I do each, with each child and with each family, and also we talk about the improvement

of the child's development. I also talk about the concerns and needs of the family, and the best approach to helping them. My supervisor is very knowledgeable and always gives me support and understanding. She's very confident in her work and helps me to build my confidence in my professional skills. She also has open door. Anytime that I need something she's always available to give me support.

Lillian: Thank you, Lucia. What you're saying is very common. We hear from many home visitors that having someone that you can reflect with about your work is essential. Some of the Early Head Start program representatives we heard from talked about the importance of reflective supervision and peer support within the program. Let's take a look at what they have to say.

Kraig Gratke: I would say that we have built a system around home visitors to be very supportive. In the last couple years, particularly since ARRA, we've reduced our supervisor-to-staff ratio. Before, it was me and one other person for 12 people, now the ratio is about one supervisor for four. We've also spent a lot of time building teams so that they can talk to each other, and put them in offices together, and said you have to have office time and access to your supervisor. The other part of that is we built a management team that's very responsive. I'm available from an administrative perspective, but we also have health staff that are available, and social work staff that are available, and mental health staff, and nutrition staff. So, if they have questions that – and that's the other thing we've been very honest about is if you don't know the answer, then don't make anything up, you know. Be honest and calm, and tell those parents you don't know the answer, and, and find the answer. And if that's us, then that's us, but then find the answer and you can get back to them.

Loletta Combs: We have had reflective supervision since early on, as well, as part of the practice. It's just part of the home visitors supervisor's role. It's just built into that position. And, the supervisor of the current staff has been an employee in this position since 2000, so we have very low turnover. So, she's developed her skills over time, too, but initially we started with weekly supervision, so every home visitor would have, at a minimum, an hour a week or more, and we've evolved now because of the staff we have, and the low turnover. They've been with us for a long time now. They're to a point where they don't need weekly, and so it's every other week. But, she has an open door policy. They know it. If they need something or something happens out in the community, they're back there talking to her about it. So, there's a team of six and one supervisor and they, at a minimum, meet as a team one time a month and more if something else is, you know, something's going on or they're going to do recruitment, planning, or those kinds of things. But, they have opportunities to discuss their issues without names as a group and just, sort of, talk about what's worked, what's not working. If they found out something in the community about a new resource or available resource that we thought wasn't available, you know, they're bringing it back to the team. So, they're very supportive of each other and have a close-knit group.

Loudell: Every family is a different story. Every family's a different challenge and you come home, you come back to your center or you go home with – facing all those problems of those families. So, what we do is provide them that mental health coaching, that one-on-one reflective supervision. With me, let's talk about, you know, how was your week? What was your most – because I always say, "Tell me the

story first." And I always ask them to tell me a rewarding story, and once they get that rewarding, they get excited with the rewarding story, the other problems become less.

Lillian: Jennifer, we often talk about reflective supervision. What are your thoughts about what we just heard?

Jennifer: Well, I'm a big advocate of reflective supervision, and it's so true that reflective supervision is essential when doing this kind of work. Home visitors need a safe environment where they can discuss the challenges of their work as well as their own vulnerabilities, and they can work with their supervisor to identify the strengths they bring to any given situation, as well. All of this ultimately supports the children and families with whom we work. We often say that reflective supervision is kind of like a parallel process. Supervisors help the home visitors to recognize their strengths and cope with the stressors – stresses of their work. Just as providers, home visitors offer opportunities for support in growth to parents, and then the parents, in turn, are strengthened to support their children in a positive and healthy way. For those who want to learn more about reflective supervision, the Early Head Start National Resource Center produced both an audio conference and a webcast on this topic earlier this year which I encourage you to listen to and watch, and both are available on the Early Childhood Learning and Knowledge Center, and the link to it is n your brow – in your resource materials for the webcast.

Lillian: Thank you, Jennifer. I'd like to hear now about some of the impacts of the home-based program option. We haven't talked very much about pregnant women, and Lucia, what are some of the impacts of home-based services on pregnant women?

Lucia: Yes, the home-based program option really makes a difference for pregnant women. We have a lot of parents who don't know how, we don't know – I mean, they don't know how to have a healthy – health pregnancy. As home visitors, we go to their homes and teach them about the stage of pregnancy so that they can understand how the baby's growing. We teach them that they have to eat well. They have to rest. They have to go to the medical appointments. Many of the pregnant mothers that we work with don't know anything about those things because in their culture, women just get pregnant, wait nine months, and see what happens. Early Head Start makes a big difference by informing the mothers how to have a healthy pregnancy, educating them about the importances of good medical care, and teaching them parenting skills. We give the parents information in writing, and we also have videos. We can have lap– we have laptops that we bring to our home visits so that we can show the parents the videos about how the baby developing and discuss them.

Lillian: Thank you, Lucia. Some of our other program directors also talked about the impacts of the home-based program option, both on pregnant women and on families as a whole. So let's take a look.

Mindy Zapata: I think that the most significant impact and measurable impact of our Early Head Start program has been the ability to truly impact maternal and child health outcomes in a significantly measureable way. We've seen more pregnant women getting into prenatal services, so therefore, we have a preventative societal cost for problems that could arise from the lack of prenatal care. Once those infants are born into the families we see those families that are participating in the home-based

model, understand the importance of preventative, well-child exams and immunizations, and we see a wonderful parent-child engagement begin to unfold as parents become more and more confident as – in their skills as parents. And we also see a tremendous impact in parents really understanding the services available to them in the community so that by the time they transition out of the Early Head Start model of home-based on to Head Start, or another preschool program, they are really moving to being successful within their local communities.

Kraig Gratke: I think some of the biggest impacts that we have and is really moving families, building a relationship that's positive, and moving families forward. I think some of our greatest success is really getting babies in the hands of their parents. You know, we have parents that are really separate, sometimes very separate, from their children, and to get parents to the point where they're picking up their children, and smiling at their children and the children are smiling back, and we're building really good bonds. I mean, they're building bonds and we're helping them do that. And the attachment that's going on there, and parents recognizing that there's a lot of joy to be had in that. It's not just work, and it's not something that we can shuffle around to other family members. You know, to see that parent-child interaction that's authentic, it's real, and, and you've grown that, and it's matured. That's cool.

Lillian: Anything you'd like to add to that, David?

David: I'd just like to add that when we're talking about supporting expecting families, and really all families in Early Head Start, then we should not forget about fathers and the important role that they play in supporting their children's healthy development. The Early Head Start home-based option offers great opportunities for home visitors to teach fathers how to bond with their babies and why it's important to engage with their babies. It's about meeting fathers where they are and tapping into what they're interested in. You know, I've found that some fathers are really interested when we start to talk to them about the baby's brain development, and how attached relationships help the baby's brain to grow. When they realized that they had the ability to positively impact their child's development, that's when they begin to get excited. They understand the value of it. Home visitors can build on that understanding and show them ways to engage with their baby to support their healthy development.

Lillian: Thank you, David. Before we take a break for questions and answers, there's one more clip I'd like to show because the one voice we haven't heard from yet is the parent. Recently, we talked to Lila – Lila Cardenas, an Early Head Start mom in Fairbanks, Alaska. Both of her boys have been served by the home-based program option, and Lila herself serves on the Policy Council for her program. We interviewed her, along with Early Head Start Director, Angela Foster Snow, about her experiences with home visiting, and let's hear what she has to say.

Lila Cardenas: My boy, Ricardo, he is, he is eight now. When, when we were in the program, we had noticed that, that he had quit talking, and it was to the point where I had snuck up behind him and I was going, "Rahhh," and he just continued playing, you know. So, we knew something was not right. So, through my home visitor, we were able to get Ricardo screened for his hearing, and apparently through his numerous ear infect – infections, he had actually built up too much fluid and he actually was not hearing us. So, after a couple operations we were able to put tubes in, but he was still vocally delayed.

And so, through our home visitor, and through another agency, Project Teach, we were able to have Ricardo screened through the school district. And so, when Ricardo turned three he was able to enter into the preschool program, and he was able to get the speech that he needed. Getting the services Ricardo needed through the FNA Early Head Start and through the school district, Ricardo went from being a quiet little boy to this amazing young man who can talk you to death. He is so sweet, and he is so smart, and he has to absolutely tell you everything and explain how everything works. The Early – The Early Head Start isn't only focusing on, on the child. I mean, the main focus is, but overall, it's the whole family. Early Head Start, I was – I am outspoken, but I'm also extremely quiet, and through, through this program they had encouraged me to become part of the, the Policy, the, the Policy Council, and I had attended. And, my first year I was voted on as vice chair and the second year I was chair, and I am just finishing up my second year as the Policy Council chair. And it has truly helped me, you know, open up and to be more outspoken, and I'm also on the Alaskan Theta Education Parent Advisory Council. I mean, so I can be a voice for my children in the school district.

Angela Foster-Snow: But without home visiting and a home visitor coming in there, and getting to know Lila, and seeing her strengths, we may not have had such a strong leader in our program. She's been an amazing Policy Council chair. She's helped us make big decisions. When we were expanding our program, she led the charge, and said what the need of our community was, and how much we needed to have more kids served in our program. And so, without that first initial opportunity through home visiting we may never have known this great potential of a leader that we have.

Lillian: This is such a great example of the impact that the home-based program option can have on a family. Lucia, you're a former Early Head Start parent yourself. Can you tell us your story, as well?

Lucia: Yes. Well, I came in from Ecuador to the United States. When I arrived here I got to confront with different barriers, like adapting to a new culture, a new community, learn a second language – English – and I have two children. They're born here, and one of them has a speech delayed. So here comes the intervention of the Head Start. A home visitor came, and helped my son to be able to wait, and have the service. Through this situation I got very involved in my children's activities, learning, development. I participated in the program as a chairperson of the Parent Coun– Council, and during those years I also was certified to have the dual credential as a home visitor, preschool, and infant, and toddlers. Then, I got the AA degree in early childhood, and right now I'm getting my BA in early childhood education. And come back with my son, he graduated this year, he got his BA, he's working, and he's doing great. The bottom line of this, the Early Head Start, is the, that this program open the doors for the parents. The parents have the opportunity to explore their potentials and they can work, they can help the children, they can help in the community, and become a better parents and they can have success with the children. So parents, I really encourage you, like Head Start say, parents are the first teacher of the children. It's in your hands.

Lillian: Thank you, Lucia. Early Head Start has helped so many families like yours. We're now going to take a short break, and when we return it'll be your time for asking us questions. We'll be right back.

[Music]

Lillian: Welcome back. We're going to take our first question. We did get several of them during our break and our first question, it comes from North Carolina from Jeff, and it's – I'm going to go with Joanny and Lucia on this question. "How do we get home-based participants interested in Policy Council?"

Lucia: Well, in my program we have orientation. During that time we provide information about the parent policy, and also a home visitor, when you go to there every week, inform the parent about the benefits to be involved in the parent policy. Because the main thing is that Head Start is for parents and children, so if they know more about the parent policy they become decision-makers. And also, they have their own budget to work in and their activities for their trainings, for the children activities. So it's very important to inform them. And also we invite, we call – we make telephone calls for the parents to let them know, to remind them about these meetings. That's how we integrate, we involve the parents and encourage them. We also, during the meetings, we provide the food, we pay for the babysitter, or provide child care and also the transportation. That is an incentive for the parents to attend every meeting.

Lillian: Great. Great. I'm sure that that's useful. And Joanny, what about you?

Joanny: In our program, I'm in charge of making sure that we get parents really interested in the Policy Council. One of the things that I do is that I'll have a really great breakfast and also another dinner, depending on which time works for the families, and during that meeting I'm talking to them about the Policy Council. I like to talk to them about the history of Head Start. I like to let them know that parent involvement is the cornerstone of Head Start, as Lucia was saying, the decision-making process, for us to move forward, and do all the innovative things that we do, we need the parents on board with us. I also like to let them know that they're going to learn a lot about just managing a nonprofit – budgets, interviewing of new staff, going over our plans, being part of committees and learning about all the different components of Early Head Start. I like to tell some parents, and it's been very useful that if they've been out of work, it's really a nice way to learn about a job. How to run a program. And, they can use that and put it on their resume. I've actually been used as a reference for some parents because they've done such an amazing job in the Policy Council. And some of the staff that we've hired have been from the Policy Council. So, and it's true, so I let them know that.

Lillian: Great. Great. Jen, do you wanted to add something?

Jennifer: Yeah, I think it's also, it's so powerful for parents to hear from other parents, so having an opportunity to hear like Lila's story, for example, and what her experience was like being on the Policy Council in the Fairbanks program, and to hear that from another parent, I think, can be really powerful, as well.

Lillian: Yeah. And also, for parents to be able to sit on a Council where other community members are there and feel a part of the community, and get to know community partners. Did you want to add anything, or can I go to my next question, David?

David: Sure. No, go to the next question.

Lillian: Okay. This comes from Illinois, and Sally writes and says, "Please discuss the required and/or recommended length for group socializations for Early Head Start." David.

David: Well, the Performance Standards doesn't necessarily address that and in a way it gives you an actual requirement, but I would defer to my other panel members to kind of share a little bit about what they've done in their programs. But when I was a director of a program, we tried to ensure that there was a significant amount of time to, obviously, set up the activity, be very clear about what we were going to do with the families, and then also have some time for them to come in and kind of relax. A little bit of socializing within themselves before we actually got into the different activities. And then, of course, there's some closure that takes place. And then, so that was, essentially, the structure that we had. Lucia?

Lucia: Well, during the socialization it is very important for the parents to have time to work the children in the classroom setting. So, the child – parents have the opportunity to observe what the children are doing. They can touch, they can hug, they can sing. They, they can see different activities, so it, that moment, that time for the parent and child is very, very important and we try to stimulate them to observe, to play, to explore with the children, and have time with them.

Lillian: Great. Thank you. Joanny, did you want to add?

Joanny: Well, if I want to talk about just time frame. In my program, we don't go less than two hours. We don't feel like less than two hours would get everything in that we need to. So I'd say two to three hours would be a nice time for a socialization length.

Lillian: Thank you. Do you want to add? No?

Jennifer: No. Lillian: Okay. Alright, well, we'll move to New York and Che asks us a very thoughtful question: "What precautions can be put in place to ensure staff will be safe when visiting homes," and she says, "especially in areas where there's high-crime rate?"

Jennifer: Well, that's an important consideration. No matter where the program is located, and the, the nature of home-based services is that you typically have a home visitor, often by themselves, going out and going to visit families and so I think it's critical for a program to have a system in place whereby they, they know where home visitors are. So when a home visitor leaves the program, or wherever they're originating from, someone should know that they've gone to this home to visit this family and what their schedule is, and some programs might have a system where they share schedules with supervisors or with others in the program. Some others may have a – if the home visitor is starting in, in a center and going off to a home, a sign-in and sign-out kind of system. That's, that's a critical part of the, the program services – that they need to have a system in place to monitor where home visitors are.

Lillian: Yes. Good idea. Yeah. I'm sure there are other ideas.

Lucia: Yes. Well, in my program we have a home visiting schedule for my supervisor so she knows where I'm going to be that day and what time, and also we have the cellular. If we have any problems we can

call, and also, it is very important for the home visitors to have common sense. If you are exposed to a red area, or a dangerous area, please stop. Don't go. Call immediately to your supervisor. Come back to the office, and then you can call back to the parent, and to let them know that you were not able to go to the home because that situation. And that's very important also, the safety of our home visitors.

Lillian: Yeah. Yeah. Good suggestions. Yes.

Joanny: What we've done in my program is that if a home visitor feels uncomfortable going into a home, we pair up. There might be a time when two home visitors will go in just to make sure that they feel safe and everything feels right. I also think that it's a good idea to have identification that you are an Early Head Start home visitor, wearing your ID outside on your jacket, or your purse would be a great way for the community to know who you are, and that you're working for an agency.

Lillian: Yeah. Good suggestions, everybody. Okay. Now, I see that there are two questions that are similar in their concern, so I'm going to try to pair them together. And the first one comes from Richard in Louisiana, and he says, "Please clarify how many visits must be conducted each school year, when a visit must be made up, and how many socializations must be conducted each year." And then, right here from Washington, DC, Eric says, "I have parents who will agree with a home visit appointment and then cancel. So, do you have any recommendations and/or strategies I can use to assist my parents with keeping their appointments?" So that's a lot, David.

David: So yes. There were several parts to that question, so I think I'll take a stab at two parts of it, and then let the, the panel members chime in. Essentially, Early Head Start is a full-year program, so it should be operating 12 months of the year, and with respect to socializations, they should happen twice a month. So...

Lillian: Alright, so we're going to move on to Lucia and Joanny to help answer Eric's question. What about when parents cancel the appointment?

Lucia: Well that is very common in our parents. Sometimes they have good reasons to cancel, for example, like if they have an appointment with immigration, they have a medical appointment, dental appointment, or they have their physical exam, so that's a good excuse. So, for the home visitor it is very important to meet where is the parent – to rearrange the schedule and have the parent meeting on another day, and that takes time, and also you need to manage the time with another family, and to to change or switch the schedule. That's how it works. And also, it is very important to planning a good socialization with great activities, and also call the parents in advance. Can be the day before, or during the morning, calling to remind the parents that today is the socialization. Please come. We are waiting. And also, it is very important if the program can do a survey with the parent's interests and then we can plan the socializations based on their interests, and their training, on their activities, so we can meet those child's – those families' needs.

Lillian: Thank you. And so, cancellations, I guess they happen in your program as well, Joanny?

Joanny: There are some families that do cancel appointments. I've had home visitors call a family, and then go and show up, and they're still not there. And so they come back and we just, we try to think about what's going on. What we've noticed is that every family is different. You have to individualize with each family. You have to, sort of, meet the family where they're at. There may be many different reasons why. They may be having a stressor that, that actual day, so what's important is to communicate with the family, call them, find out what's going on with that particular family, go back to your supervisor, let her know if the stressors are something that's worrying you. It's very important to document that you've done that. It's very important to continue encouraging the families. Sometimes this is their first time understanding that appointments are to be kept, and it can, it can get a little gray since you're going into their home. The other thing I just wanted to mention is that if, as a program you have to cancel the home visit, which happens at times, make sure that you make that one up with the family.

Lillian: Yes. Good. Good. Thank you for that.

Jennifer: And can I just underscore one thing that I've heard several people say, and that's time. And it takes time to build relationships with families and with parents, and you're, you have to take that time to build the relationship to really get to know the families and to understand where there are so you can meet them where they are. And so, you know, sometimes individuals need to cancel for a variety of reasons, but it takes time to understand what those reasons are, and you need to build that relationship.

Lillian: Yes. Thank you. You know, it's interesting because we just heard so many stories and testimonies about home-based program option, and yet this, this question that Margaret from Indiana sends us is an interesting one, and I think it will resonate with you all. Margaret says that, "Sometimes parents see the home-based program option as a stepping stone to center-based care, and so how do we get to see them, let them see that the home-based program option is a valid option, just in and of itself?"

Joanny: Well, if my program staff is watching now they're probably saying, wow, Joanny must answer that. We were – in the beginning of our Early Head Start program, because we started right at the start – we were fully center-based. And now we're almost half of our program is home-based. So we had to switch gears, sort of, in the middle of our whole time doing Early Head Start. One of the things that we – we were gung ho about it, we wanted to do home-based, but I think that we had back track later because we realized the staff has to also understand that home-based is a valid option. We have to understand what it means. We have to look at the research, understand that it's a valid option, that it has a lot to offer the families, that it's a beautiful way to, to get comprehensive services for Early Head Start. And once we understood that and understood the importance of it, then we can market it that way to the families. I like – I think it's important, kind of what Lucia said, of early on having an agreement with them and letting them know what their responsibilities are as well as yours. One of the things you can do is letting them know what the home-based option is, and if they agree, they can sign on. It's not for every family. Some families need center-based, then home-based is not for them. And, you have to be okay with that, because it's not going to be a good fit.

Lillian: Great. Did you want to – David?

David: Well, yeah. I just wanted to add, I think, it is, it's a mindset shift, it's a cultural shift. I think you have to be really clear with, with programs, that they're selling this in a particular way that suggests that home-based within itself is its own viable option and that a colleague or a professional colleague, friend, said to us the other day that in some respects, if we really believe that parents are their children's first teachers, then this is, in some respects, almost like their home-schooling their kids, and it's really, really important. That's a nice way that program's going to actually sell the importance of home-based option.

Lillian: Yeah. No, thank you for that, and, and Lucia, you wanted to add something, I see.

Lucia: Yes. Well, I all I could say is, the way to promote the service for Early Head Start is by telephoning our parents. We have many families that really come to this country without any knowledge, so if we encourage them that the home-based program is to go to the homes, teach them how to have time with the children, to learn, to explore, and they have one-to-one because these days, parents are so occupied with work. They don't have time to spend with their children. So, through this program, it's very important that we can let the parents know that the 90 minutes that we spend in the visit we are really willing to work with them, with the parent and the child, and the home visitor is there to coach, to guide, to promote child development.

Lillian: Great. Thank you. You know, we have time just really for one more question, and so I'm going to read this one from Cindy in Arkansas. And I think this is something we haven't yet talked about, but I think it's real important. "How do you assess the training needs for new and experienced home visitors?" Jen?

Jennifer: Well, the first thing I would do is go back to what we talked about earlier, which is having a system in place for supervision, and not just administrative supervision where you're kind of going through and making sure that people are doing the work that they're supposed to be doing, which is important, but also having a system in place for reflective supervision so that home visitors can think about what their strengths are, what their needs are. And they can, through that ongoing communication, collaboration with their supervisor, surface some of those needs that can then lead to professional development training. So, I think that's the place to begin.

Joanny: In, well, in my program, we have once a month staff development days, and on those days we really try to think about what goals do we have for the program, what challenges or what areas did we feel we needed to improve, and we did our self assessment where we thought about how we're doing in the outcomes of the children. Also, when you evaluate the staff – we do it once a year, we have a staff evaluation, one-on-one, and, sort of, see like where they are, what things they're interested in, and then we try to incorporate those into the staff development day. Also, there's a lot of great trainings, at least in New York. I found that. A lot of great trainings out there. We love, also, to go to Birth to Three, and Zero to Three – they've been really, really helpful for our staff.

Lillian: Well, with that positive note I think we're going to have to stop anyway. Those are all of the questions that we have time for. So, I'd like to take this opportunity to thank all of our panelists for

joining me in the studio today. David, Jennifer, Joanny, Lucia, and Angie Godfrey for giving our federal welcome. And as we close out, we want to share with you a few last clips of some of our colleagues across the country talking about what they find to be so powerful and unique about the Early Head Start home-based program option. Thank you for joining us, and enjoy these closing thoughts.

J. Ronald Lally: I think that one of the things that home visitation does to families is it gives them a message that, you know, you're not alone. It's an intimate connection. It's in the family's home. The child doesn't have to be brought anywhere. And when what you're doing is, you're seen as a support, sometimes home visitors described as "one of my best friends" by these family members because there's somebody looking out for you, and rooting for you in a way that really makes the work special to family members. And, I think it's, it's a part of Head Start that really gets to the heart of what Head Start is about, which is dealing with low-income, at-risk families in a way that helps them do the job that Head Start says every parent wants to do, and that is, raise their child as best they can.

Mindy: I think that it's both a privilege and an honor to go into a family's home every single week and families – every family that I've ever met in the history of my experience in the Early Head Start program has wanted to do the very best for their unborn baby, their infant, or their toddler, and for a variety of life circumstances they lack the resources in order to achieve those maximum outcomes. So, I think that it's really critical to address those challenges that we keep the lens and the focus upon that perspective, that every parent wants, wants what's best for their infant and their toddler and their unborn baby, and that these services that the Early Head Start home visitation model can serve as a beacon of hope for those families to move to the next level of parenting, and it's truly those aspects, as they are all woven together, that lead to future school success for those very young children.

[End video]